

# 2010 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A98000001125

**FILED**  
**Apr 16, 2010**  
**Secretary of State**

**Entity Name:** JENE'S RETIREMENT INVESTORS, LTD.

**Current Principal Place of Business:**

6865 N. LINCOLN AVE.  
LINCOLNWOOD, IL 60712

**New Principal Place of Business:**

**Current Mailing Address:**

C/O NORMAN GINSPARG  
3389 SHERIDAN ST., #195  
HOLLYWOOD, FL 33021

**New Mailing Address:**

**FEI Number:** 65-0920415      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GINSPARG, NORMAN J  
12221 WEST DIXIE HIGHWAY  
NORTH MIAMI, FL 33161      US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**GENERAL PARTNER INFORMATION:**

Document #: P98000040692  
Name: JENE'S RETIREMENT LIVING, INC.  
Address: 1595 NE 145 ST  
City-St-Zip: N. MIAMI, FL 33161

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: PHILIP ESFORMES

PD

04/16/2010

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date