

# 2010 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# B98000000069

**FILED**  
**Feb 14, 2010**  
**Secretary of State**

**Entity Name:** THE BREEN FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

9 AVENUE OF THE FLOWERS  
LONGBOAT KEY, FL 34228

**New Principal Place of Business:**

1211 GULF OF MEXICO DRIVE  
PROMENADE UNIT 110  
LONGBOAT KEY, FL 34228

**Current Mailing Address:**

3960 MERRICK RD.  
SEAFORD, NY 11783

**New Mailing Address:**

FEI Number: 58-2260831

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BREEN, JAMES J  
9 AVENUE OF THE FLOWERS, PMB 115  
LONGBOAT KEY, FL 34228 US

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

BREEN, JAMES J  
1211 GULF OF MEXICO DRIVE  
PROMENADE UNIT 110  
LONGBOAT KEY, FL 34228 US

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

02/14/2010

Date

**GENERAL PARTNER INFORMATION:**

Document #:

Name: BREEN, JAMES J  
Address: 9 AVENUE OF THE FLOWERS, PMB 115  
City-St-Zip: LONGBOAT KEY, FL 34228

**ADDRESS CHANGES ONLY:**

Address: 1211 GULF OF MEXICO DRIVE  
City-St-Zip: LONGBOAT KEY, FL 34228

Document #:

Name: BREEN, JOAN F  
Address: 9 AVENUE OF THE FLOWERS, PMB 115  
City-St-Zip: LONGBOAT KEY, FL 34228

Address: 1211 GULF OF MEXICO DRIVE  
City-St-Zip: LONGBOAT KEY, FL 34228

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: JAMES J. BREEN

Electronic Signature of Signing General Partner

02/14/2010

Date