

# **2010 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A04000000576

**FILED**  
**May 03, 2010**  
**Secretary of State**

**Entity Name:** TORRICELLI FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

13736 BRYNWOOD LANE  
FORT MYERS, FL 33912

**New Principal Place of Business:**

**Current Mailing Address:**

13736 BRYNWOOD LANE  
FORT MYERS, FL 33912

**New Mailing Address:**

**FEI Number:** 01-0812763      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

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

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

NATHAN J. ADLER, P.A.  
8270 COLLEGE PARKWAY  
SUITE 103  
FORT MYERS, FL 33919 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

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

**ADDRESS CHANGES ONLY:**

Document #: P04000058237  
Name: TORRICELLI MANAGEMENT, INC.  
Address: 13736 BRYNWOOD LANE  
City-St-Zip: FORT MYERS, FL 33912

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: RICHARD J. TORRICELLI

D

05/03/2010

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

\_\_\_\_\_  
Date