

# **2011 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A04000000576

**FILED**  
**Mar 16, 2011**  
**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 ( )**

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

NATHAN J. ADLER, P.A.  
8270 COLLEGE PARKWAY  
SUITE 103  
FORT MYERS, FL 33919 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 #: P04000058237  
Name: TORRICELLI MANAGEMENT, INC.  
Address: 13736 BRYNWOOD LANE  
City-St-Zip: FORT MYERS, FL 33912

**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: RICHARD J TORRICELLI MD

D

03/16/2011

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

\_\_\_\_\_  
Date