

# **2012 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A04000000864

**FILED**  
**Feb 13, 2012**  
**Secretary of State**

**Entity Name:** ANNO FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

1336 HIDEAWAY DRIVE SOUTH  
JACKSONVILLE, FL 32259

**New Principal Place of Business:**

**Current Mailing Address:**

1336 HIDEAWAY DRIVE SOUTH  
JACKSONVILLE, FL 32259

**New Mailing Address:**

**FEI Number:** 57-1204431

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CLARK, NOEL  
1336 HIDEAWAY DRIVE SOUTH  
JACKSONVILLE, FL 32259 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 #:

Name: CLARK, NOEL  
Address: 1336 HIDEAWAY DRIVE SOUTH  
City-St-Zip: JACKSONVILLE, FL 32259

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Document #:

Name: CLARK, ANNELIESE  
Address: 1336 HIDEAWAY DRIVE SOUTH  
City-St-Zip: JACKSONVILLE, FL 32259

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:** NOEL P CLARK

GP

02/13/2012

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

\_\_\_\_\_  
Date