

# **2010 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A04000002044

**FILED**  
**Feb 15, 2010**  
**Secretary of State**

**Entity Name:** ANDERSON FISKE PARTNERS LIMITED

**Current Principal Place of Business:**

123 QUINCY CIRCLE  
SANTA ROSA BEACH, FL 32459

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 4937  
SANTA ROSA BEACH, FL 32459

**New Mailing Address:**

**FEI Number:** 20-1995312

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCIARRETTA, STEVEN A ESQ  
2799 NW BOCA RATON BLVD #203  
BOCA RATON, FL 33431 US

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

SCIARRETTA, STEVEN A ESQ  
2799 NW BOCA RATON BLVD  
SUITE #203  
BOCA RATON, FL 33431 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

02/15/2010

Date

**GENERAL PARTNER INFORMATION:**

Document #: L04000092561  
Name: ANDERSON FISKE MANAGEMENT, LLC  
Address: PO BOX 4937  
City-St-Zip: SANTA ROSA BEACH, FL 32459

**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: HELEN S. FISKE ANDERSON

GP

02/15/2010

Electronic Signature of Signing General Partner

Date