

# **2011 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A04000002044

**FILED**  
**Mar 13, 2011**  
**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  
SUITE #203  
BOCA RATON, FL 33431 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 #: 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: ANDERSON FISKE MANAGEMENT, LLC

GP

03/13/2011

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

\_\_\_\_\_  
Date