

# **2011 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A05000001228

**FILED**  
**Apr 18, 2011**  
**Secretary of State**

**Entity Name:** SILPE FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

940 SOUTH OCEAN BOULEVARD  
MANALAPAN BEACH, FL 33462

**New Principal Place of Business:**

**Current Mailing Address:**

940 SOUTH OCEAN BOULEVARD  
MANALAPAN BEACH, FL 33462

**New Mailing Address:**

**FEI Number:** 65-0698362

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SILPE, DONALD  
940 SOUTH OCEAN BOULEVARD  
MANALAPAN BEACH, FL 33462 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: SILPE, DOANLD  
Address: 940 S OCEAN BLVD  
City-St-Zip: MANALAPAN BEACH, FL 33462

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Document #:

Name: SILPE, LINDA  
Address: 940 S OCEAN BLVD  
City-St-Zip: MANALAPAN BEACH, FL 33462

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: DONALD SILPE

RA

04/18/2011

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

\_\_\_\_\_  
Date