

# **2010 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A93000001180

**FILED**  
**Jan 04, 2010**  
**Secretary of State**

**Entity Name:** GRAND OLOM, LIMITED PARTNERSHIP

**Current Principal Place of Business:**

1201 SOUTH OCEAN DRIVE, APT 1904 N.  
HOLLYWOOD, FL 33019

**New Principal Place of Business:**

1201 SOUTH OCEAN DRIVE  
APT 1904 N.  
HOLLYWOOD, FL 33019

**Current Mailing Address:**

C/O SAVRAN BENSON, LLP CPA FIRM  
146 MONTGOMERY AVE SUITE 300  
BALA CYNWYD, PA 19004

**New Mailing Address:**

**FEI Number:** 65-0450263      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

WALLACH, JANET  
1201 SOUTH OCEAN DRIVE  
APARTMENT 1904 N  
HOLLYWOOD, FL 33019 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: WALLACH, JANET  
Address: 1201 SOUTH OCEAN DR., APT. 1904 N  
City-St-Zip: HOLLYWOOD, FL 33019

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Document #:

Name: WALLACH, MICHAEL  
Address: 116 HAROLD DRIVE  
City-St-Zip: WOODMERE, NY 11598

Address:  
City-St-Zip:

Document #:

Name: WALLACH, EILEEN  
Address: 235 OLD MILL DAM ROAD  
City-St-Zip: KINGSTON SPRINGS, TN 37802

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: MITCHELL BENSON

CPA

01/04/2010

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

\_\_\_\_\_  
Date