

# **2010 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A97000001190

**FILED**  
**Sep 10, 2010**  
**Secretary of State**

**Entity Name:** BACK NINE LIMITED PARTNERSHIP

**Current Principal Place of Business:**

3261 VIA CASSIO  
LAKE GENEVA, WI 53147

**New Principal Place of Business:**

177 SOUTHMORELAND PLACE  
DECATUR, IL 62521

**Current Mailing Address:**

3261 VIA CASSIO  
LAKE GENEVA, WI 53147

**New Mailing Address:**

177 SOUTHMORELAND PLACE  
DECATUR, IL 62521

**FEI Number:** 65-0757920

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SOMMERS, BARBARA K  
380 COLUMBIA DRIVE  
SUITE 111  
WEST PALM BEACH, FL 33409 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 #: L98000002440  
Name: BACK NINE MANAGEMENT, LLC  
Address: 3261 VIA CASSIO  
City-St-Zip: LAKE GENEVA, WI 53147

**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: JOHN E BRITT

MGMR

09/10/2010

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

\_\_\_\_\_  
Date