

# **2011 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A98000001290

**FILED**  
**Feb 13, 2011**  
**Secretary of State**

**Entity Name:** HAAS FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

745 BEACH VIEW DRIVE  
BOCA GRANDE, FL 33921

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1817  
BOCA GRANDE, FL 33921

**New Mailing Address:**

**FEI Number:** 59-3514678

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EMERICH, GUY S ESQ.  
99 NESBIT STREET  
PUNTA GORDA, FL 33950 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: HAAS, JAMES E  
Address: 745 BEACH VIEW DRIVE  
City-St-Zip: BOCA GRANDE, FL 33921

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Document #:

Name: HAAS, HELEN A  
Address: 745 BEACH VIEW DRIVE  
City-St-Zip: BOCA GRANDE, FL 33921

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: JAMES E. HAAS

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

02/13/2011

\_\_\_\_\_  
Date