

# **2011 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# B00000000146

**FILED**  
**Feb 25, 2011**  
**Secretary of State**

**Entity Name:** THE STRIANESE FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

10 SEAVIEW BLVD.  
PORT WASHINGTON, NY 11050

**New Principal Place of Business:**

**Current Mailing Address:**

10 SEAVIEW BLVD.  
PORT WASHINGTON, NY 11050

**New Mailing Address:**

**FEI Number:** 11-3437499

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WHITE, JOHN II  
1645 PALM BEACH LAKES BLVD  
SUITE 1200  
WEST PALM BEACH, FL 33401 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: STRIANESE, BERNARD

Address: 10 SEAVIEW BLVD.

City-St-Zip: PORT WASHINGTON, NY 11050

**ADDRESS CHANGES ONLY:**

Address:

City-St-Zip:

Document #:

Name: STRIANESE, CARMELLA

Address: 10 SEAVIEW BLVD.

City-St-Zip: PORT WASHINGTON, NY 11050

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: BERNARD V. STRIANESE

MR.

02/25/2011

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

\_\_\_\_\_  
Date