

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000062061

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

**Entity Name:** LENTZ FAMILY PARTNERSHIP LLC

**Current Principal Place of Business:**

7269 GOLF POINTE WAY  
SARASOTA, FL 34201

**New Principal Place of Business:**

**Current Mailing Address:**

200 EAST 27TH ST.  
14C  
NEW YORK CITY, NY 10016

**New Mailing Address:**

**FEI Number:** 22-2865427      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

LENTZ, LEONARD  
7269 GOLF POINTE WAY  
SARASOTA, FL 34201      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

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** LENTZ, PHILIP  
**Address:** 200 EAST 27TH STREET, APT. 14C  
**City-St-Zip:** NEW YORK, NY 10016

**Title:** MGRM  
**Name:** LENTZ, CAROL  
**Address:** 444 CENTRAL PARK WEST  
**City-St-Zip:** NEW YORK, NY 10025

**Title:** MGRM  
**Name:** LENTZ, DAVID  
**Address:** 27 HADRIAN DRIVE  
**City-St-Zip:** LIVINGSTON, NJ 07039

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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: PHILIP LENTZ

MGRM

01/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date