FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP **ANNUAL REPORT** 1998



empowered to execute this report as required by chapter 620, Florida Statutes.

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

a. DOCUMENT# A07749

97 SEP 12 PM 1:57



	A07749	A01148									
THE STORAGE PLACE, LTI	D.				TILIR 1211 2211 27211 21211 21212 21212 21211 11211						
Malling Address	Principal Office Address		3. Date Form	med or Registered	5a. Capital Contributions as Shown on record.						
3660 S CONGRESS AVE	3660 S CONGRESS AVE BOYNTON BEACH FL 33426		07/31/	1979							
BOYNTON BEACH FL 33426			3a. Date of		\$924,800.00						
			09/25/1	1996	5b. Amount of Capital Contributions in FLORIDA						
2. Malling Address	20 000000000000000000000000000000000000		4. State or C	country of Formation	to date:						
Z. Mailing Address	28. Principal Office Address	Za. Principal Office Address			\$924,800						
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		per	Applied For						
City & State	City & State	City & State		1795	Not Applicable						
Zip Country	Zio Countri		7. Certificate	7. Certificate of Status Desired \$6.75 Additional Fee Required 8. Make check payable to: Dept. of State (See reverse side for fee Information)							
Zip Country	Σίβ	Zip Country									
Q Name and Address at 5	Second Physics and Association		40 //								
9, Neme and Address of Current Registered Agent O'CONNOR, JAMES L. 100 LAKESHORE DRIVE APT. 857 NORTH PALM BEACH FL 33408		Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc.									
						City		FL Zip Code			
						10a. Pursuant to the provisions of sections 620.10 for the purpose of changing its registered of agent. I am familiar with, and accept the obline.	lice or registered agent, or both, in the State of	amed limited partr Florida. Such cha	ership organized or register nge was authorized by its gr	ed under the laws of t eneral partner(s). I her	the State of Florida, submits this statement reby accept the appointment of registered
						SIGNATURE (Registered Agent Accepting Appointme	ent)			DATE	
		A GENERAL PARTNER TH	IAT IS A CORPORATION UST BE REGISTERED A	, LIMITED ND ACTI	PARTNERSHI	P OR OTHE OFFICE.	R BUSINESS ENTITY				
11. Name(s) of General Partner(s)	11a. Address of Each Gel	neral Partner e Box Numbers)	11b. City, State & Zip Code		11c. Registration/ Document Number						
O'CONNOR, JAMES L	100 LAKESHORE DRIVE #		NORTH PALM BEACH FL								
Brandner, Reinhard Jr	315 EDEN ROAD	315 EDEN ROAD		L	Of or						
- 1 TA					/9701096025 41 <u>.25 ****\$41.25</u>						
Note: General partners MAY I											
 I do hereby certify that the information supplied Corporations from any liability of non-compliant this annual report is true and accurate and that 	ce with Section 119.07(3)(k) in the event that th	e information supp	lied is deemed exempt from	n public access. I furth	ner certify that the information indicated on						