


FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP  
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

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|---|--|--|--|
| <b>LIMITED PARTNERSHIP<br/>ANNUAL REPORT<br/>1999</b>   |  |  <b>FLORIDA DEPARTMENT OF STATE<br/>Sandra B. Mortham<br/>Secretary of State<br/>DIVISION OF CORPORATIONS</b> |  |
| <b>1. Name of Limited Partnership</b><br><br>10235 W. SAMPLE ROAD LTD.  |  | <b>1a. DOCUMENT #</b><br><b>A27399</b>   |  |
| <b>Mailing Address</b><br>% GERALD W. GRITTER<br>100 NORTHEAST THIRD AVE., SUITE 1100<br>FT. LAUDERDALE FL 33301                      |  | <b>Principal Office Address</b><br>% GERALD W. GRITTER<br>100 NORTHEAST THIRD AVE., SUITE 1100<br>FT. LAUDERDALE FL 33301  |  |
| <b>2. Mailing Address</b><br>Suite, Apt. #, etc.<br>City & State<br>Zip Country   |  | <b>2a. Principal Office Address</b><br>Suite, Apt. #, etc.<br>City & State<br>Zip Country  |  |
| <b>3. Date Formed or Registered</b><br>11/17/1988   |  | <b>5a. Capital Contributions as Shown on record.</b><br>\$1,200,000.00   |  |
| <b>3a. Date of Last Report</b><br>12/30/1997  |  | <b>5b. Amount of Capital Contributions in FLORIDA to date:</b>   |  |
| <b>4. State or Country of Formation</b><br>FL   |  | <b>6. FEI Number</b><br>59-2422156   |  |
| <b>7. Certificate of Status Desired</b><br><input checked="" type="checkbox"/> Applied For<br><input type="checkbox"/> Not Applicable |  | <b>8. Make check payable to: Dept. of State (See reverse side for fee information)</b><br>\$8.75 Additional Fee Required   |  |

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



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|--|--|---|--|
| <b>9. Name and Address of Current Registered Agent</b><br>EMO CORPORATE SERVICES, INC.<br>100 NORTHEAST THIRD AVENUE<br>SUITE 1100<br>FT. LAUDERDALE FL 33301  |  | <b>10. If changed, new Registered Agent/Office</b><br>Name<br>Street Address (P.O. Box Number Is Not Acceptable)<br>Suite, Apt. #, etc.<br>City FL Zip Code |  |
| <b>10a.</b> Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes. |  |   |  |
| SIGNATURE (Registered Agent Accepting Appointment) _____ DATE _____  |  |   |  |
| <b>A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b>   |  |   |  |
| <b>11. Name(s) of General Partner(s)</b><br>DANCU HOLDING, INC.  | <b>11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)</b><br>16 NE 4TH ST | <b>11b. City, State &amp; Zip Code</b><br>FT. LAUDERDALE FL 333   | <b>11c. Registration/Document Number</b><br>P96000041990 |
| 200002716862-2<br>12/21/98-01002-006<br>*****25 *****528.25<br>585.00 535.00<br>AL DEC 15 1998   |  |   |  |

**Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.**

**12.** I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability for non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE 12/1/98  
 Typed or Printed Name of General Partner Signing Form Robert Kreyen, President Daytime Telephone Number 954-779-7100

CR2E003 (8/98)