

**FILE ON OR BEFORE APRIL 8, 1998 TO AVOID  
REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP  
ANNUAL REPORT  
**1998**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

98 MAR -9 PM 3: 25

1. Name of Limited Partnership

1a. DOCUMENT #  
**A92000000040**

**THE COLDBROOKE LIMITED PARTNERSHIP**



Mailing Address

~~47047 BOCA CLUB BLVD.~~  
~~UNIT 141A~~  
~~BOCA RATON FL 33487~~

Principal Office Address

~~17047 BOCA CLUB BLVD.~~  
~~UNIT 141A~~  
~~BOCA RATON FL 33487~~

3. Date Formed or Registered

11/09/1992

5a. Capital Contributions as Shown on record.

\$3,800,000.00

3a. Date of Last Report

03/26/1997

5b. Amount of Capital Contributions in FLORIDA to date:

\$ 3,800,000

4. State or Country of Formation

FL

2. Mailing Address

20320 Fairway Oaks Dr.

Suite, Apt. #, etc.

331

City & State

Boca Raton, FL

Zip

33434

Country

USA

2a. Principal Office Address

20320 Fairway Oaks Dr.

Suite, Apt. #, etc.

331

City & State

Boca Raton, FL

Zip

33434

Country

USA

6. FEI Number

65-0359306

Applied For  
 Not Applicable

7. Certificate of Status Desired

~~Standard~~

\$8.75 Additional Fee Required

8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent

**MAHLER, I. KENNETH**  
~~17047 BOCA CLUB BLVD.~~  
~~UNIT 141A~~  
~~BOCA RATON FL 33487~~

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

20320 Fairway Oaks Drive

Suite, Apt. #, etc.

331

City

Boca Raton

State

FL

Zip Code

33434

10a. 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

2/17/98

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY  
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s)

COLDBROOKE, INC.

11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)

195 FARMINGTON AVE

11b. City, State & Zip Code

FARMINGTON CT 06032

11c. Registration/ Document Number

F92000000150

700002461527-3  
-03/19/98--01003--016  
\*\*\*\*535.00 \*\*\*\*535.00

KWM/dus

**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 of 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

2/17/98

Typed or Printed Name of General Partner Signing Form

I. Kenneth Mahler

Daytime Telephone Number

561-470-0940

CR2E003 (12/97)