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

LIMITED PARTNERSHIP ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1. Name of Limited Partnership

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DOCUMENT # A93000000955

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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ADDETT FAMILY DADTHEDOUR A LTD					
BARRETT FAMILY PARTNERSHII	PI, LID.				
Mailing Address	Principal Office Address		3. Date Formed or Registered	58. Capital Contributions as Shown on record.	
300 SQUTH DUCAN AVENUE	SUITE 300		09/21/1993	6 400.00	
SUITE 300			3a. Date of Last Report	\$100.00	
CLEARWATER FL 34815	CLEARWATER FL 34815		12/02/1996	5b. Amount of Capital Contributions in FLORIDA	
9 Maillian Address	20 000000000000000000000000000000000000		4. State or Country of Formation	to date:	
2. Malling Address 300 South Duncan Avenue	2a. Principal Office Address 300 South Duncan Avenue		FL		
Suite, Apt. # etc. Suite 275	Suite, Apt. #, etc.		6. FEI Number		
	Suite 275		59-3212665	Applied For Not Applicable	
City & State Clearwater, FL	City & State Clearwater, FL		7. Certificate of Status Desired	\$8.75 Additional	
Zip Country	Zip	Country		Fee Required	
33795 Pinellas	337 <u>55</u>	Pinellas	8. Make check payable to: Dept. of t	State (See reverse side for tee information)	
9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office					
Name					
LETTELLEIR, JOSEPH T Street Address (P.O.		P.O. Box Number Is Not Acceptable)	Cornelius c/o J B Management, Inc. Box Number Is Not Acceptable) Duncan Avenue, Suite 275		
300 SOUTH DUNCAN AVENUE	Suite, Apt. #, etc.			uncan Avenue, Suite 275	
SUITE 300	Suite 275				
		Clearwate		FL 33755	
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, agent, I am familiar with, and accept the obligations of section 620.192, Florida Statutes.					
SIGNATURE (Registered Agent Accepting Appointment). Church A Camelia DATE 115/98					
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)	11a. Address of Each Genera (Do NOT Use Post Office Bo		b. City, State & Zip Codo	11c. Registration/ Document Number	
BARRETT, JOHN P JR.	% 2164 15TH CIRCLE NO		ST. PETERSBURG FL 337		
			9000024 -02/06/ ****14	1241292 3801120-003 1.25 ****141.25	
	5250 8	S. 75	du		
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 Soction 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 sign from some legal effects is 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	<u>unus</u>		DATE .	1/15/48	
Typed or Printed Name of General Partner Signing Form	Juhn K. BARO	ett, SR	Daytime Telephone Number 3	13 461-7702	