

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

LIMITED PARTNERSHIP  
ANNUAL REPORT  
1999



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

SEC. FILED  
DIVISION OF CORPORATIONS  
99 JAN 27 PM 3:35

1. Name of Limited Partnership

1a. DOCUMENT #  
A95000000691

DOONER FAMILY EQUITIES, LTD.

Mailing Address

P.O. BOX 7369  
NAPLES FL 34101

Principal Office Address

1010 5TH AVENUE SOUTH, SUITE 300  
NAPLES FL 34102

2. Mailing Address

Suite, Apt. #, etc.

City & State

Zip Country

2a. Principal Office Address

Suite, Apt. #, etc.

City & State

Zip Country

3. Date Formed or Registered

04/27/1995

3a. Date of Last Report

12/09/1997

4. State or Country of Formation

FL

6. FLL Number

65-0597596

7. Certificate of Status Desired

5a. Capital Contributions as  
Shown on record

\$2,258,627.00

5b. Amount of Capital  
Contributions in FLL Form  
to date

\$2,258,627.00

☐ Applied For  
☐ Not Applicable

\$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

DOONER, ANTON E  
1010 5TH AVENUE SOUTH, SUITE 300  
NAPLES FL 34102

Name

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

Suite, Apt. #, etc.

City

FL Zip Code

10. If changed, new Registered Agent/Office

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

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)

DOONER MANAGEMENT, INC.

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

1010 5TH AVENUE SOUTH

11b. City, State & Zip Code

NAPLES FL 34102

11c. Registration  
Document Number

P95000029954

4000002767074-01  
-02/08/99-01020-023  
\*\*\*\*526.25 \*\*\*\*526.25

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 12/10/98

Typed or Printed Name of General Partner Signing Form Anton E. Dooner

Daytime Telephone Number 941-643 4211

CR2E003 (8/98)