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

LIMITED PARTNERSHIP ANNUAL REPORT 1998

& R INVESTMENTS OF ORLANDO, LTD.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT# A96000001599

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 JAN 12 PM 3: 09



Mailing Address		Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record
400 EAST SOUTH STREET. SUITE 500 ORLANDO FL 32801		400 EAST SOUTH STREET, SUITE 500 ORLANDO FL 32801		08/26/1996	ቀንሮስ ስስ
				38. Date of Last Report	\$750.00
				03/06/1997	5b. Amount of Capital Contributions in FLOFIIDA
2. Mailing Address Suite, Apt. #, etc.		2a. Principal Office Address Suite, Apt. #, etc.		4. State or Country of Formation	to date: \$35,000.00
				FL 6. FET Number	<u> </u>
City & State		City & State		59-3401001	Applied For Not Applicable
				7. Cortificate of Status Dosired	\$8.75 Additional Fee Required
Zip	Country	Zip	Country	8. Make check payable to: Dept. of	State (See reverse side for fee inform
O N	ame and Address of Current Re	nistered &gent	1	10. If changed, new Registere	d Agent/Other
		gistered Agent	Name	10. It brianged, new trogratore	o Agentonico
BOURNE, ROBERT A			Street Address (f	P.O. Box Number Is Not Acceptable)	
400 E. SOUTH STREET		Suite. Apt. #, e		otc.	
ORIANDO EL 32801			Suite. Apt. #, etc.	·	
ORLANDO FL 32801	sions of sections 620 1051 and 62	0 192, Florida Stalutos, the above	City	organized or registered under the laws of the	FL Zip Code
Oa. Pursuant to the provis for the purpose of ch agent. I am familiar w SIGNATURE (Registered Agen	sions of sections 620 1051 and 62 anging its registered office or regionth, and accept the obligations of all Accepting Appointment).	stered agent, or bolls, in the State section 620 192. Florida Statutes. A CORPORATIO	City -named fimilted partnership of Florida Such change w	organized or registered under the laws of the salauthorized by its general partner(s). They DATE	FL ne State of Florida, submits this stater oby accept the appointment of registe
IOa. Pursuant to the provis for the purpose of ch agent. I am familiar w SIGNATURE (Registered Agen A GENERAL P	sions of sections 620 1051 and 62 anging its registered office or regi with, and accept the obligations of al Accepting Appointment) PARTNER THAT IS MUST I	stered agent, or bolls, in the State section 620 192. Florida Statutes. A CORPORATION BE REGISTERED	City -named fimited partnership of Florida Such change w N, LIMITED PA AND ACTIVE	organized or registered under the laws of the sas authorized by its general parlner(s). There DATE ARTNERSHIP OR OTHE WITH THIS OFFICE.	FL ne State of Florida, submits this stater oby accept the appointment of registe R BUSINESS ENTIT
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Typed or Printed Name of General Partner Signing Form

SIGNATURE .

Robert

12. I do hereby certify that the information supplied with this filing is voluntarily lumished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes i release the Division of

(407)

Presidentaytime Telephone Number.

Corporations from any hability of non-compliance with Section 119.07(3)(k) in the event toal 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 eath. I further certify that I am a General Partner of the limited partnership, receiver or trustee