

**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

98 APR 16 PM 4:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



1. Name of Limited Partnership

1a. DOCUMENT #
A97000002382

PHYTRUST, LTD.

Mailing Address

ATTN: JAMES W. GOODWIN, ESQ.
111 E. MADISON ST., SUITE 2300
TAMPA FL 33602

Principal Office Address

ATTN: JAMES W. GOODWIN, ESQ.
111 E. MADISON ST., SUITE 2300
TAMPA FL 33602

3. Date Formed or Registered

10/30/1997

5a. Capital Contributions as
Shown on Records

5.7.18.00

3a. Date of Last Report

1st yr.

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

\$5,218

4. State or Country of Formation

FL

2. Mailing Address

1204 N. UNIVERSITY DR.
Suite, Apt. #, etc.

2a. Principal Office Address

1204 N. UNIVERSITY DR.
Suite, Apt. #, etc.

City & State

PLANTATION, FL

City & State

PLANTATION, FL

Zip

33322

Country

U.S.A.

Zip

33322

Country

U.S.A.

6. FEI Number

59-3476365

☐ Applied For
☐ Not Applicable

7. Certificate of Status Desired

☐ \$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

GOODWIN, JAMES W ESQ.
111 E. MADISON STREET, SUITE 2300
TAMPA FL 33602

10. If changed, new Registered Agent/Office

Name

NEIL A. NATKOW

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

1204 N. UNIVERSITY DR.

Suite, Apt. #, etc.

City

PLANTATION

FL

Zip Code

33322

10a. Pursuant to the provisions of sections 620.1061 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

3/30/98

**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)

NAN II, INC.

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

111 E. MADISON STREE

11b. City, State & Zip Code

TAMPA FL 33602

11c. Registration/
Document Number

P97000093358

MAIL THIS ORIGINAL

300002495183--9
-04/21/98--01051--002
****480.75 ****480.75

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

3/30/98

Typed or Printed Name of General Partner Signing Form

NEIL A. NATKOW, PRES. NAN II, INC.

Residence Telephone Number

954-475-0707

CR2E003 (12/97)