

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
JAN 27 PM 6:30

LIMITED PARTNERSHIP
ANNUAL REPORT
1999



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

1. Name of Limited Partnership PINEBROOKE CC, LTD.		1a. DOCUMENT # A98000000637	
Mailing Address 601 BAYSHORE BLVD., SUITE 650 TAMPA FL 33606		Principal Office Address 601 BAYSHORE BLVD., SUITE 650 TAMPA FL 33606	
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 03/09/1998	5a. Capital Contributions as Shown on record \$100.00
3a. Date of Last Report	5b. Amount of Capital Contributions in FLORIDA to date \$99.00
4. State or Country of Formation FL	☒ Applied For ☐ Not Applicable
6. FEIN Number 59-3507264	7. Certificate of Status Declared ☐ \$8.75 Additional Fee Required
8. Make check payable to Dept. of State (See reverse side for information)	

9. Name and Address of Current Registered Agent FUNK, CHARLES B 601 BAYSHORE BLVD., SUITE 650 TAMPA FL 33606	10. If Change of New Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City
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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). Thereby 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) PINEBROOKE CC, INC.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 601 BAYSHORE BLVD., S	11b. City, State & Zip Code TAMPA FL 33606	11c. Registered Document Number P98000021812
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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)(b), 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 effect 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

Typed or Printed Name of General Partner Signing Form **JEFFREY B. MEEHAN**

Daytime Telephone Number **813-251-1221**

CR2E003 (8/98)