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. Mortham
Secretary of State
DIVISION OF CORPORATIONS

99 JAN 27 AM 11:25

1. Name of Limited Partnership

1a. DOCUMENT #
A98 00000 1210

Arnold Groves and Ranch, Ltd.

CR1129

Mailing Address	Principal Office Address
15625 Frank Jerrell Rd. Clermont, FL 34711	15625 Frank Jerrell Rd. Clermont, FL 34711

3. Date Formed or Registered
5/14/98

3a. Date of Last Report

4. State or Country of Organization
Florida

5a. Capital Contributions as Stated in Agreement
$3,586,403.00

5b. Amount of Capital Contributions as of Last Report

6. FEI Number
59-3517479
☐ Applied For
☐ Not Applicable

7. Certified Copy Requested ☐ **$8.75** Additional Fee Required

8. Make check payable to Dept. of State (see reverse side for fee information)

2. Mailing Address	**2a.** Principal Office Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

9. Name and Address of Current Registered Agent

Louv, Arthur R.
801 North Magnolia Ave., Ste 201
Orlando, FL 32803

10. If Changed, Name of New Registered Agent/Office

Name

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

Suite, Apt. # etc.

City **FL** Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.193, 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 the general partner(s). I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of section 620.193, 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)	**11a.** Address of Each General Partner (Do NOT Use Post Office Box Numbers)	**11b.** City, State & Zip Code	**11c.** Real Partner Designated Number
John R. Arnold, Inc.	666 Seminole Dr.,NE	Winter Park, FL 32789	
Arnold, John R.	666 Seminole Dr.,NE	Winter Park, FL 32789	

SECRETARY OF STATE
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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 exemptions stated in Section 119.07(3)(i), 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. Further, I 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 John R Arnold DATE 12/30/98

Typed or Printed Name of General Partner Signing Form John R. Arnold Daytime Telephone Number (407)896-0020

CR2E003 (8/97)