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

1. Name of Limited Partnership

1a. DOCUMENT # **A00656**

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 SEP 28 PM 3: 15

FRANKLIN ENGINEERING, LIMITED					
Mailing Address RT 1. BOX 280	Principal Office Address RT 1. BOX 280		3. Date Formed or Registered 10/01/1962	58. Capital Contributions as Shown on record.	
MCALPIN FL 32062	MCALPIN FL 32062		3a. Date of Last Report 10/02/1997 4. State or Country of Formation	5D. Amount of Capital Contributions in FLORIDA to date:	
2. Malling Address 9105 192 NO ST.	2a. Principal Office Address 9/05 192 NO	BT.	FL		
Suite, Apt. #, etc. City & State	Suite, Apl. #, etc. City & State		6. FEI Number 59-099 188 1	Applied For Not Applicable	
MCALAIN, FL Zip Country	MCALPIN, Zip 32062	FZ	7. Certificate of Status Desired	\$8.75 Additional Fee Regulred	
32062 Country	32062		8. Make check payable to: Dept. of	State (See reverse side for fee information)	
9. Name and Address of Current Registered Agent		1	10. If changed, new Registered Agent/Office		
for the purpose of changing its registered office agent. I am familiar with, and accept the obligation of the control of the second of the control of the co	AT IS A CORPORATION S	Street Address (P. Suite, Apt. #, etc. City d limited partnership of the Suite Such change was	euthorized by its general partner(s). I hereb	FL Zip Code 32062 State of Florida, submits this statement y accept the appointment of registered SENT. 24, 1998	
11. Name(s) of General Partner(s)	JST BE REGISTERED AN 11a. Address of Each Genera (Do NOT Use Post Office Bo	Dadon		11c. Registration/	
MACFARLANE, JAMES W.	7105 192 Na ST	7. Teal (10-10)	MCALPIN FL 32062 500026 -09/30/	352 1 55—0 7380 10 30025 11.25 ****141.25	
Note: General partners MAY N	OT be changed on this forn	n; an amend	ment must be filed to cha	ange a ge neral partner.	
12. I do hereby certify that the information supplied w		qualify for the exemp	tion stated in Section 119.07(3)(k), Florida S	tatutes. I release the Division of	

this annual report is true and accurate and that my algorithms shall have the same logal effects as if made under path. I further certify that I am a General Partner of the limited partnership, receiver or trustee

Daytime Telephone Number

empowered to execute this report as required by chapter 620, Figfida Sigtutes.