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

LIMITED PARTNERSHIP ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT#

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 MAR -2 PM 3: 24

	A01592	A01592					
GOLDEN APPLE COMPA	ANY, LTD.					131 131 131 131 131 131 131 131 131 131	
Malling Address	Principal Office Address	Principal Office Address		3. Date Formed or Registered		58. Capital Contributions as Shown on record.	
25 N. PINEAPPLE AVE. SARASOTA FL 34236	25 N. PINEAPPLE AVE. SARASOTA FL 34236	: : : : : : : : : : : : : : : : : :		09/16/1971 38. Date of Last Report		\$100,000.00	
				01/06/1997		5b. Amount of Capital Contributions in FLORIDA to date:	
2. Mailing Address	28. Principal Office Address	28. Principal Office Address			of Formation	to date.	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			FL 6. FEI Number 59-1374385		Applied For	
City & State	City & State			7. Certificate of Stat		Not Applicable \$8.75 Additional Fee Required	
Zip Country	Zip	Country		8. Make check pays	able to: Dept. of	State (See reverse side for fee information)	
9. Name and Addres	es of Current Registered Agent	<u> </u>		10. If changed	new Registered	d Agent/Office	
		Name					
SHEA, NORMAN J., III 800 S. OSPREY AVENUE		Street Address (P.O. Box Number Js. Not Accentable)					
BLDG. A		Suite, Apt #, etc.					
SARASOTA FL 34236		City					
agent. I am familiar with, and accept to SIGNATURE (Registered Agent Accepting App.	ored office or registered agent, or both, in the State of the obligations of section 620 192, Florida Statutes. Pointment) THAT IS A CORPORATION, MUST BE REGISTERED A	LIMITEC	PART	NERSHIP O	DATE .		
11. Name(s) of General Partner(s)	Address of Foot Con	aval Daste se	11b.	City, State & Zip		11c. Registration/	
TUROFF, ROBERT E.		11a. (Do NOT Use Post Office Box Numbers) 25 N. PINEAPPLE AVENU		SARASOTA FI -03/10			
THREE ARTS PRODUCTION .	25 N. PINEAPPLE AVEN	iU	SAR	asota fl	<i>ক•</i> ** <i>σ</i> •********************************	/9801104016 H1.25 ****541.25 370319	
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1			<u> </u>	. 			
Note: General partners Ma	AY NOT be changed on this for	rm; an am	endme	nt must be fil	ed to cha	inge a general partner.	
Corporations from any liability of non-cor	upplied with this filing is voluntarily funished and does impliance with Section 119.07(3)(k) in the event that the nd that my signature shall have the same local effects juired by chapter 620, Florida Statules.	information sup	plied is deem	ned exempt from public	c access. I furthe meral Partner of	er certify that the information indicated on	

Typed or Printed Name of General Partner Signing Form

Robert E. Turoff

Daytime Telephone Number 941-366 - 2646