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

## LIMITED PARTNERSHIP ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

1a. DOCUMENT # A06083  PALM BAY MOBILE HOME PARK LIMITED  Meiling Address Principal Office Address 3. Date Formed or Registered 751 10TH ST. E. 751 10TH ST. E. 11/04/1977  PALMETTO FL 34221 PALMETTO FL 34221 3a. Date of Last Report 09/15/1997  2. Mailing Address 2a. Principal Office Address FL Suite, Apt. #, etc. Suite, Apt. #, etc. 6. FEI Number 59-1774947  Zip Country Zip Country  Zip Country  Table Office Address 5-1774947  7. Certificate of Status Desired	5a. Capital Contributions as Shown on record. \$0.00  5b. Amount of Capital Contributions in FLORIDA to date:  Applied For Not Applicable  \$8.75 Additional Fee Required  State (See reverse side for fee Information)
Mailing Address Principal Office Address 751 10TH ST. E. PALMETTO FL 34221 PALMETTO FL 34221  2. Mailing Address  2a. Principal Office Address FL Suite, Apt. #, etc. Suite, Apt. #, etc. 6. FEI Number 59-1774947  7. Certificate of Status Desired  2ip Country Zip Country  7. Make check payable to: Dept. of: Name TANENBAUM, WILLIAM  Street Address (P.O. Box Number Is Not Acceptable)	5a. Capital Contributions as Shown on record. \$0.00  5b. Amount of Capital Contributions in FLORIDA to date:  Applied For Not Applicable  \$8.75 Additional Fee Required
751 10TH ST. E. PALMETTO FL 34221  PALMETTO FL 34221  2. Mailing Address  28. Principal Office Address  FL  Suite, Apt. #, etc.  City & State  City & State  City & State  Country  7. Certificate of Status Desired  7. Certificate of Status Desired  8. Make check payable to: Dept. of Street Address (P.O. Box Number (s. Number (s. Not Acceptable))	\$0.00  5b. Amount of Capital Contributions in FLORIDA to date:  Applied For Not Applicable  \$8.75 Additional Fee Required
PALMETTO FL 34221  3a. Date of Last Report 09/15/1997  4. State or Country of Formation FL Suite, Apt. #, etc. Suite, Apt. #, etc. 6. FEI Number 59-1774947  7. Certificate of Status Desired  2ip Country 7. Country 8. Make check payable to: Dept. of Status Desired  9. Name and Address of Current Registered Agent  TANENBAUM, WILLIAM  Street Address (P.O. Box Number is Not Acceptable)	\$0.00  5b. Amount of Capital Contributions in FLORIDA to date:  Applied For Not Applicable  \$8.75 Additional Fee Required
2. Mailing Address  28. Principal Office Address  FL  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  Country  Zip  Country  Zip  Country  7. Certificate of Status Desired  8. Make check payable to: Dept. of States  TANENBAUM, WILLIAM  Street Address (P.O. Box Number   Is Not Acceptable)	5b. Amount of Capital Contributions in FLORIDA to date:  Applied For Not Applicable  \$8.75 Additional Fee Required
2. Mailing Address  2a. Principal Office Address  FL  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  Country  Ame  TANENBAUM, WILLIAM  Street Address (P.O. Box Number   Not Acceptable)	Applied For Not Applicable  \$8.75 Additional Fee Required
28. Principal Office Address  FL  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  Country  To Country  P. Name and Address of Current Registered Agent  TANENBAUM, WILLIAM  Street Address (P.O. Box Number   Is Not Acceptable)	Applied For Not Applicable  \$8.75 Additional Fee Required
Suite, Apt. #, etc.  City & State  City & State  City & State  City & State  Country  Country  Country  Country  S. Make check payable to: Dept. of State Name  TANENBAUM, WILLIAM  Street Address (P.O. Box Number [s. Not Acceptable))	Not Applicable  \$8.75 Additional Fee Required
City & State  City & State  7. Certificate of Status Desired  8. Make check payable to: Dept. of Status Desired  9. Name and Address of Current Registered Agent  TANENBAUM, WILLIAM  Street Address (P.O. Box Number (s. Not Acceptable)	Not Applicable  \$8.75 Additional Fee Required
Zip Country Zip Country State  7. Certificate of Status Desired  8. Make check payable to: Dept. of:  9. Name and Address of Current Registered Agent Name  TANENBAUM, WILLIAM  Street Address (P.O. Box Number   Not Acceptable)	\$8.75 Additional Fee Required
2ip Country Zip Country 8. Make check payable to: Dept. of St. Mak	Fee Required
9. Name and Address of Current Registered Agent  TANENBAUM, WILLIAM  Street Address (P.O. Box Number Is Not Acceptable)	State (See 18 volse side for fee information)
TANENBAUM, WILLIAM  Street Address (P.O. Box Number is Not Acceptable)	
TANENBAUM, WILLIAM Street Address (P.O. Box Number   Not Acceptable)	Agent/Office
Street Address (P.O. Box Number  s Not Acceptable)	
	6433691
PALMETTO FL 33561 Suite, Apt. #, etc. —09/18.	/9801060024
	0.00 ************************
10a. Pursuant to the provisions of sections 620.1951 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the 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 hereb 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 OTHE	y accept the appointment of registered
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.	T Police
11. Name(s) of General Partner(s) 118. (Do NOT Use Post Office Box Numbers) 11b. City, State & Zip Code	11c. Registration/ Document Number
TANENBAUM, WILLIAM 751 U.S. HWY 80T NOR PALMETTO FL	
	a-16

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

🛂 2. 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 William Tanenbaum
Typed or Printed Name of General Pertner Signing Form WILLIAM TANENBAYM

DATE SEPT 14,1998 Daytime Telephone Number (941) 722-7048