FILE ON OR BEFORE APRIL 7, 1999 TO AVOID REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

SECRETARY OF STATE

SECRETARY OF STATE

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FILED

1. Name of Limited Partnership	1a. DOCUMENT A08132	1 (88) 841 (\$1) 88(8) 88(8) 168B	L SERVANI TOKKERKAN KANTI MAKEL MAKEL MAKEL ANAM BARM ENEMU	
THE BAREFOOT MAILMAN, LI				
Mailing Address 1061 HILLSBORD MILE HILLSBORD BEACH FL 33362 2 301 SOUTH FEDERAL FE LAN DESCRIPTE FL 2. Malling Address 333/6	Principal Office Address 1061 HILLSBORO MILE HILLSBORO BEACH FL 33362 HILLSBORO BEACH FL 33362 2a. Principal Office Address	3. Date Formed or Registered 11/14/1979 3a. Date of Last Report 09/26/1997 4. State or Country of Formation FL	5a. Capital Contributions as Shown on record \$680,000.00 5b. Amount of Capital Contributions in FLORIDA to date	
Suite, Apt. #, etc. City & State	Suite, Apt. #, etc. City & State	6. FEI Number 59-2319112	Applied For Not Applicable	
Zip Country	Zip Country	7. Certificate of Status Desired 8. Make check payable to Dept of	\$8.75 Additional Fee Required State (See reverse side for fee infurnation)	
9. Name and Address of Current Registered Agent KONSTEN, J M 1061 HILLSBORO MILE Street Address		10. If changed, new Registered Agent/Office ess (P.O. Box Number Is Not Acceptable)		
HILLSBORO BEACH FL 33362	Suite, Ap	I #, etc	FL Zip Code	
10a. Pursuant to the provisions of sections 620 1051 and for the purpose of changing its registered office or regagent. I am familiar with, and accept the obligations of sections of the section of the section of the sec	istered agent, or both, in the Stale of Florida. Such cha			
A GENERAL PARTNER THAT	S A CORPORATION, LIMITE BE REGISTERED AND ACT	D PARTNERSHIP OR OTHE	R BUSINESS ENTITY	
11. Name(s) of General Partner(s)	11a. (Do NOT Use Post Office Box Numbers)	11b. Cily. State & Zip Code	11c. Registration/ Document Number	
BAREFOOT MANAGEMENT COMPANY	1061 HILLSBORO MILE	HILLSBORO BEACH FL F: 11010102 -04/01 *****5	76.25 ****526.25	
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.				

12. Ido 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 strip in 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

Typed or Printed Name of General Partner Signing Form

KC81)351

Daytime Telephone Number

UKZE003 (1Z/98)

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