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

LIMITED PARTNERSHIP ANNUAL REPORT 1999 1. Name of Limited Partnership

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT#



	A11223		
HTC LIMITED			
Mailing Address	Principal Office Address	3. Date Formed or Registered	5a. Capital Centributions as Shown on record
2632. N.W. 43RD STREET B-95	2632. N.W. 43RD STREET 8-95	09/24/1981 3a. Date of Last Report	\$100,000.00
GAINESVILLE FL 32606	GAINESVILLE FL 32606	12/16/1997 4. State or Country of Formation	5b. Amount of Capital Contributions in Factor () A to date
2. Mailing Address	2a. Principal Office Address	FL	
Suite, Apt #, etc	Suite, Apt #, etc	6, FEI Norther 59-2154605	☐ Applied For ☐ Not Applicable
City & State	City & State	7. Certificate of Status Desired	\$8.75 Additional

2. Mailing Add	2a. Principal Office Address		ddress	4. State or Country of Formation	to date	
Suite, Apt #, etc		Suite Apt #, etc		FL 6. FE! Number	☐ Applied For	
City & State		City & State		59-2154605	Not Applicable	
Z _I p Country		-		7. Certificate of Status Desired	\$8.75 Additional For Regular d	
		<i>Ζ</i> (p	Country	8. Make Chick payable to Dept. of State (Scorreverse sete for fee information)		
	9. Name and Address of C	urrent Registered Agent		10. If changed, new Registered	Agent/Office	
			Name	Name		
HENRY, NANCY J. 2632 N.W. 43RD ST., B-95			Street Addres	Steet Address (P.O. Box Number Is Not Acceptable)		
GAINESVILLE FL 32606			Suite Apt #.	Suite Apt #. etc		
			City	City		
for the pu	rpose of changing its registered offi		State of Florida, Such Change	ship organized or registered under the laws of the was authorized by its general partner(s). Thereb		
	istered Agent Accepting Appointmen			DATE		
A GENE				PARTNERSHIP OR OTHE E WITH THIS OFFICE.	R BUSINESS ENTITY	
11. Name(s) of General Partner(s)	11a. Address of E	ach General Partner ost Office Box Numbers)	11b. City State 8 Zip Code	11c. Registration' Document Number	
HENRY, NANCY J.		2632 N.W. 43RD	ST.,B-	GAINESVILLE FL		
				1, 18, 18, 18, 18, 14, 14 1, 17, 18, 18, 18, 18 2, 18, 18		

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 status in Section 119 07(3)(s). Florida Statutes, Trelease 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 logal effects as if made under oath. I further certify that I am a General Plathier 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 Nancy J. Hebry