

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

FILED

98 DEC 22 AM 11:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



1. Name of Limited Partnership

1a. DOCUMENT #
A11391

HARBOR BRIDGE 17, A LIMITED PARTNERSHIP

Mailing Address

110 DONNA COURT
PUNTA GORDA FL 33950

Principal Office Address

110 DONNA COURT
PUNTA GORDA FL 33950

3. Date Formed or Registered

10/26/1981

3a. Date of Last Report

04/08/1998

4. State or Country of Formation

FL

5a. Capital Contributions as
Shown on record.

\$159,500.00

5b. Amount of Capital
Contributions in FLORIDA
to date:

SAME AS 5A

2. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

2a. Principal Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. FEI Number

59-2132080

☐ Applied For
☐ Not Applicable

7. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent

PONTICOS, ANDREW S
110 DONNA COURT
PUNTA GORDA FL 33950

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

100 MACEDONIA BLVD.

Suite, Apt. #, etc.

411

City

Punta Gorda

FL

Zip Code

33950

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement 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 hereby accept the appointment of registered 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 OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name(s) of General Partner(s)

PONTICOS, ANDREW S
GREENBERG, BENJAMIN
RICHARDS, WILLIAM F

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

110 DONNA CT
21583 EDGEWATER DR.,
621 MACEDONIA

11b. City, State & Zip Code

PUNTA GORDA FL
PT. CHARLOTTE FL
PUNTA GORDA FL

11c. Registration/
Document Number

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-01/08/98--01098--013
***526.25 ***519925
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Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. 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

DATE

Typed or Printed Name of General Partner Signing Form

ANDREW S. PONTICOS

Daytime Telephone Number

941-637-9996

CR2E003 (8/98)