FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT

1997



GLOKIM INVESTORS LIMITED PARTNERSHIP

empowered to execute this report as required by chapter 620, Florida Statutes.

Typed or Printed Name of General Partner Signing Form C. KIM EVAWS

SIGNATURE A

FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # A12213

FILED

96 DEC 24 PM 2: 37

SECREMARY OF STATE TALLAHASSEE, FLORIDA



|--|--|

Mailing Adoress 2060 RIDGELANE ROAD CLEARWATER FL 34615		Principal Office Address 2060 RIDGELANE ROAD CLEARWATER FL 34615		•	3. Date Formed or Registered 03/08/1982 3a. Date of Last Report 09/14/1995		5a. Capital Contributions as Shown on record. \$8,000.00	
				;				
3 N.T. A.H.		20 0 10 10 10 10 10 10 10 10 10 10 10 10			4. State or Country of Formation	Contr to da		
2. Mailing Address		2a. Principal Office Address			WI	\$8,000.00		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. FEI Number 59-2194751	Applied For Not Applicable		
City & State		City & State				\$8.75 Additional Fee Required		
Zip	Country	Zip	Country		B. Make check payable to: Dept. of	of State (See reverse side for fee information		
0.1	and Address of Correct De	alata-ad Agant	Ţ		10. If changed, new Registerer	d Agont/Office		
9. Name and Address of Current Registered Agent			Name		10. If Changed, Hew negistered	u AgenyOnice		
EVANS, E. KIM 2060 RIDGELANE RD. CLEARWATER FL 34615			Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc.					
				City Zip Code				
for the purpose of ch	anging its registered office or reg	20 192 Florida Statules, the above-name istered agent, or both, in the State of For section 620, 192, Florida Statutoa.			rized by its general partner(s). I here	eby accept the	appointment of registered	
SIGNATURE (Registered Ager		11 Pm 2	<u> </u>			11-2		
A GENERAL P	ARTNER THAT IS MUST	S A CORPORATION, L BE REGISTERED AN	D ACTIV	PARTI E WITI	IERSHIP OR OTHE 1 THIS OFFICE.	R BUSI		
11. Name(s) of Genera	al Partner(s)	Address of Each Genera (Do NOT Use Post Office B	l Fartner ox Numbers)	11b.	City, State & Zip Code	11c.	Registration/ Document Number	
EVANS, E. KIM		2060 RIDGELANE ROAD		CLE	ARWATER FL 34615			
LÖUDERMILK, ALTON C		455 MELROSE AVE.		WINTER PARK FL 32789				
WINSLOW, ROBERT M		936 LAKE ADAIR BLVD.		ORLANDO FL 32804				
					90002 -01/06 ****1	0461 /9701 94.75	3295 036006 ****194.75	
Note: General p	artners MAY NOT	e changed on this forn	n; an ame	endmen	t must be filed to ch	ange a g	eneral partner.	

12. I do hereby certify that the information supplied with this filing is voluntarly lumished 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. Hurther certify that the information indicated on this armual report is true and accurate and trial my signature shall have the same legal effects as if made under ooth. Hurther certify that I am a General Partner of the limited partnership, receiver or trustee

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Daytime Telephone Number 813-442-1749