

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  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

98 SEP 29 PM 3:29

1. Name of Limited Partnership

1a. DOCUMENT #  
A15963

SKOOB ASSOCIATES LIMITED PARTNERSHIP



Mailing Address

% NEWKIRK LIMITED PARTNERSHIP  
500 WEST PUTNAM AVENUE, 4TH FL  
GREENWICH CT 06830

Principal Office Address

% NEWKIRK LIMITED PARTNERSHIP  
500 WEST PUTNAM AVENUE, 4TH FL  
GREENWICH CT 06830

3. Date Formed or Registered

12/14/1983

3a. Date of Last Report

11/19/1997

4. State or Country of Formation

CT

5a. Capital Contributions as  
Shown on record.

\$3,913,250.00

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

2. Mailing Address

c/o The NewKirk Group

Suite, Apt. #, etc. Suite 214

100 Jericho Quadrangle

City & State

Jericho, NY

Zip

11753

Country

2a. Principal Office Address

c/o The NewKirk Group

Suite, Apt. #, etc. Suite 214

100 Jericho Quadrangle

City & State

Jericho, NY

Zip

11753

Country

6. FEI Number

13-3212558

☐ 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

THE PRENTICE HALL CORPORATION SYSTEM  
1201 HAYS ST., SUITE 105  
TALLAHASSEE FL 32301

10. If changed, new Registered Agent/Office

Name

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

Suite, Apt. #, etc.

City

FL

Zip Code

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)

SANZAR ASSOCIATES

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

%500 W. PUTNAM AVE.  
c/o 100 Jericho  
Quadrangle,  
Ste. 214

11b. City, State & Zip Code

GREENWICH CT  
Jericho, NY 11753

11c. Registration/  
Document Number

GP9700000740

8000002653628--6  
-10/01/98--01068--019  
\*\*\*\*526.25 \*\*\*\*526.25

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

SEE ATTACHED

DATE

SKOOB ASSOCIATES LIMITED PARTNERSHIP

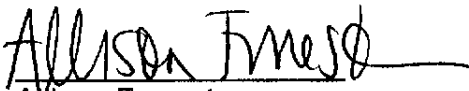
By: Sanzar Associates  
General Partner

By: Sanzar I Limited Partnership  
General Partner

By: Sanzar Manager LLC  
General Partner

By: Sue LLC  
Member

By: Newkirk Manager Corp.  
Manager

By:   
Allison Forrester,  
Assistant Secretary  
(516) 681-3636

Date: 9/8/98