## 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

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Name of Limited Partnership	1a. DOCUMENT # <b>A17395</b>		SECRETARY OF STATE TALLAHASSEE, FLORIDA			
THE JAYMEE COMPANY LIMITED PARTNERSHIP						
Mailing Address	Principal Office Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.	
211 E. SHERMAN AVE. DUBOIS PA 15801	211 E. SHERMAN AVE. DUBOIS PA 15801			07/03/1984 3a. Date of Last Report 12/29/1997	\$19,000.00  5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address	2a. Principal Office Address	2a. Principal Office Address		4. State or Country of Formation	to date:	
Suite, Apt. #, etc. City & State	Suite, Apt. #, etc.  City & State			6. FEI Number 25-1292450	Applied For Not Applicable	
Zip Country	Zip	Zip Country		7. Certificate of Status Desired  8. Make check payable to: Dept. or	\$8.75 Additional Fee Required f State (See reverse side for fee information)	
9. Name and Address of Curren	t Registered Agent			10. If changed, new Registers	ed Agent/Office	
		Name				
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD			Street Address (P.O. Box Number Is Not Acceptable)			
PLANTATION FL 33324		Suite, Apt. #, etc.				
					FL Zip Code	
10a. Pursuant to the provisions of sections 620,1051 ar for the purpose of changing its registered office or agent. I am familiar with, and accept the obligation  SIGNATURE (Registered Agent Accepting Appointment)  A GENERAL PARTNER THAT MUS	registered agent, or both, in the State of Flo s of section 620,192, Florida Statutes.	rida. Such chan	PART	prized by its general partner(s). I here  DATE  DATE	by accept the appointment of registered	
11. Name(s) of General Partner(s)	Address of Each Gener (Do NOT Use Post Office E	I Dade	11b.	City, State & Zip Code	11c. Registration/ Document Number	
ROSENBERG, JOSEPH	}	211 E. SHERMAN AVENUE		30IS PA	2671339 <del></del> 7	
				-10/2 *****	3798—01071—013 221.75 ****221.75	
				dee		
Note: General partners MAY NOT	<del></del>	=		<del> </del>		
12. I do hereby certify that the information supplied with t Corporations from any liability of non-compliance with this annual report is true and accurate and that my si empowered to execute this eport-as required by cha.	n Section 119.07(3)(k) in the event that the is gnature shall have the same legal effects as	nformation supp	olied is deeme	ed exempt from public access. I furthe	er certify that the information indicated on	
SIGNATURE	1 h	lea	<u> </u>	DATE	10-13-98	
Typed or Printed Name of General Partner Signing Form	Joseph Rosenberg	316	<u> </u>	Daytime Telephone Number	314) 583-5121	