1. Name of Limited Partnership 1a. DOCUVIEIN 1 # A17446	LIMITED PARTNERSHIP ANNUAL REPORT 1999	Sandra B Secretar	CATION AND \$500 PENALTY FEE FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED DIVISION OF CORPORATIONS 98 DEC 17 PM 4:09	
Mailing Address Principal Office Address 3, Mer Former or Registered 5a. Capital Controlutions on ered. 200 E. ROBINSON STREET 200 E. ROBINSON STREET 3, Mer Former or Registered 511,000.00 310 E. BOBINSON STREET 200 E. ROBINSON STREET 310,000 Class Address 511,000.00 311,000 FL 32801 31,000 Class Address 4, State or Country of Formation 50-Access of Classing Address 2. Mailing Address 28, Principal Office Address FL 59-2372558 Access of Classing Appl. 4, otc. 2. Mailing Address Clay & State Clay & State 7 conflicture of State Desired \$17,72,1994 3. Marks and Address of Current Registered Agent 10, If charged, new Registered Agent/Office 8, Media chard, payota fair, for a hold in the formation of state Desired for a hold in the formation of state Office Address (PC). Box Namber Is Mil Acceptable() \$10,000.00 9, Marks and Address of Current Registered Agent 10, If charged, new Registered Agent/Office \$10,000.00 9, Marks and Address of Current Registered Agent 10, If charged, new Registered Agent/Office \$10,000.00 9, Marks and Address of access Sto. 105 and 620.102. Portice State, Beatwork address (PC). Box Namber Is Mil Acceptable() \$100.E. ROBINSON ST. \$100.E. ROBINSON ST. <td>1. Name of Limited Partnership</td> <td>^{1a.} DOCUM A17446</td> <td colspan="2">^{1a.} DOCUMENT # A17446</td> <td>rn 4: 09</td>	1. Name of Limited Partnership	^{1a.} DOCUM A17446	^{1a.} DOCUMENT # A17446		rn 4: 09	
Nating Address Proceptic Office Address 3. Mea Former or Registered 58. Capital Control Units of Section 11/10/10/1994 58. Capital Control Units of Section 11/10/10/10/1994 <	THE ARBORS, LTD.					
20 E. FORMSON STREET 20 E. FORMSON STREET 301, E. ADDINGON STREET	Mailing Address	Principal Office Address			5a. Capital Contributions as	
Sulf a 30 OPLANDO FL 32001 Side Late of Count of Report 2. Malling Address 2a. Principal Office Address FL 2. Malling Address 2a. Principal Office Address FL Sulta, Apt. #, etc. Side Late of Country of Formation Stressed 2. Malling Address City & State FL Stressed 2. Malling Address City & State FL Stressed Applied For 2. December 2017 Zip Country Stressed Stressed Applied For 2. December 2017 Country Zip Country Stressed	200 E. ROBINSON STREET	200 E. ROBINSON STREET		07/12/1984	1	
2. Mailing Address 28. Principal Office Address 4. Suite a Country of Formation 50. Anound re Capital Control of Formation Suite, ApJ, #, etc. Suite, ApJ, #, etc. Suite, ApJ, #, etc. 6. FEI Number 9. Anound re Country of Formation Zp Country Zip Country 7. Centification of Residue of States Depined 9. Anound reside of States Depined	•				- ψ11,000,00	
2. Mailing Address 22. Principal Office Address FL Suite, Apt. #, etc. Suite, Apt. #, etc. 6. FET Mamber Applied For City & State City & State 7. Centificate of State Depend 9. 92372358 Control Zip Country Zip Country 8. Mate check parentia for Data of State (See movers dot for Feb Info 9. Name and Address of Counert Registered Agent 10. If changed, new Registered AgentOffice Name MARKS, ROBERT O. State Information of state (See movers dot for Feb Information of State (See Mo	ORLANDO FL 32801	OREANDO FE 32801		12/11/1997	5b. Amount of Capital	
Sulfa, Apt. #, etc. Sulfa, Apt. #, etc. 6. FEI Number 59-2372358 Applied For Zip Country Zip Country Zip State 7. Centificate of Status Desired State Stat	2. Mailing Address	2a. Principal Office Address	2a. Principal Office Address		Contributions in FLORIDA to date:	
City & State City & State 7. Centificate of S9-2372358 Applied Fer Zip Country Zip Country R. Make check payable for Dept. of State (See newnes also for health of the Information of State (See newnes also for health of the Information State (See newnes also for health of the Information State (See newnes) and S	Quite Ant # sta	Suite Ant # etc				
City & State City & State 7. Cartificate of Status Desired \$8,75 Acdits Zip Country Zip Country 8, Mate check payable to: Dept. of Status Desired \$8,75 Acdits 20 Country 8, Mate check payable to: Dept. of Status Desired \$8,75 Acdits 9. Name and Address of Current Registered Agent 10, if changed, new Registered Agent/Office MARKS, ROBERT O. State Address (P.D. Box Number is Not Acceptable) State Address (P.D. Box Number is Not Acceptable) State Address (P.D. Box Number is Not Acceptable) State Address (P.D. Box Number is Not Acceptable) State Address (P.D. Box Number is Not Acceptable) State Address (P.D. Box Number is Not Acceptable) State Address (P.D. Box Number is Not Acceptable) State Address (P.D. Box Number is Not Acceptable) State Address (P.D. Box Number is Not Acceptable) State Address (P.D. Box Number is Not Acceptable) State Address (P.D. Box Number is Not Acceptable) State Address (P.D. Box Number is Not Acceptable) State Address (P.D. Box Number is Not Acceptable) State Address (P.D. Box Number is Not Acceptable) State Address (P.D. Box Number is Not Acceptable) State Address (P.D. Box Number is Not Acceptable) State Address (P.D. Box Number is Not Acceptable) State Address (P.D. Box Number is Not Acceptable) S	Suite, Apt. #, etc.	Sune, Apc. #, etc.	-	••		
Zip Country Zip Country Response 9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office 9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office MARKS, ROBERT 0. 200 E. ROBINSON ST. SUITE 865 Statt Address (PO. Box Number Is Not Acceptable) Suite, Apt 8, dot. Statt Address (PO. Box Number Is Not Acceptable) Clay FL Zip Code 10a, Pursuant to the providen of excitore 820.1051 and 620.192, Florids Statutes, the above-named limited partnership organized or registrand under the laws of the State of Florida, stateholits is registered agent, or boh, in the State of Florida, Such Florida Statutes, State of Change agent Accepting Approximment of excitor 620.192, Florids Statutes, State of Florida, Such Florida Statutes, State of Florida, Stateholits State State, State of Change agent Accepting Approximment of registered Agent Accepting Approximment of excitor 620.192, Florida Statutes, State of Change agent Accepting Approximment of excitor 620.192, Florida Statutes, State Of Change agent Accepting Approximment of the problement Partner (s). Interest Agent Accepting Approximment of the state of Change agent Accepting Approximment of the state of Change agent Accepting Approximment of Partner MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 110. Car, State & Zp Code 111. Car, State & Zp Code 112. Cargoting State & Change agent Approximation approximation approximation approximation approximat Accepting State of Thorda Statutes.	City & State	City & State	City & State			
9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office MARKS, ROBERT 0. Stroot Address (PO, Box Number is Not Acceptable) 200 E. ROBINSON ST. Stroot Address (PO, Box Number is Not Acceptable) Suffe, ApL &, otc. City ORLANDO FL 32801 City 10a. Pursuant to the provisions of sections 620.1051 and 620.1021 provide Statutes. The above-named limited partnership organized or registered under the laws of the Statute of Florida, suchmits Nith statutes agent. I am familiar with, and accept the obligations of section 620.122. Florids Statutes. SIGNATURE (Registered Agent Accepting Approximment) DATE A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENT MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of General Partner(s) 11. Name(s) or General Partner(s) 11. Name(s) or General Partner(s) 11. Name(s) or General Partner(s) 12. 200 E. ROBINSON ST.#8 000 E. ROBINSON ST.#8 ORLANDO FL 32801 200 E. General partners MAY	Zip Country	Zip	Country		Fee Required	
MARKS, ROBERT 0. 200 E. ROBINSON ST. SUITE 865 ORLANDO FL 32801 10a. Pursuant to the provisions of sections 620.1051 and 620.102. Florida Statutes, the above-named limited partnership organized or registrand under the laws of the State of Florida, such this state for the purpose of changing its registrand agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the explaintment of registrand agent. I am familiar with, and accepting Appaintment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENT MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of General Partner(s) 11a. "Address of Sach General Partner MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of General Partner(s) 11a. "Address of Sach General Partner MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of General Partner(s) 11a. "Address of Sach General Partner MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of General Partner(s) 11a. "Address of Sach General Partner MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of General Partner(s) 11a. "Co NOT Use Post Office Box Numbers] 11b. City, State & Zip Code 11c. "Registration" PEINBERG, LOUIS MARKS, ROBERT O. 200 E. ROBINSON ST.#8 ORLANDO FL 32801 200 E. ROBINSON ST.#8 200 E. ROBINSON ST				D. Make Creck payable to: Dept. Of a		
MARKS, ROBERT 0. 200 E. ROBINSON ST. SUITE 865 ORLANDO FL 32801 Util: Apt. #, etc. City FL Zp Code Total City City FL Zp Code Total City FL Zp Code FIL FL	9. Name and Address of Curre	ent Registered Agent		10. If changed, new Registered	Agent/Office	
200 E. HOBINSON S1. SUITE 865 ORLANDO FL 32801 10a. for the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the Statu of Florida, sculmills this statu for the purpose of changing its registered degent, or both, the Statu of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. 1 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 ENT MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. DATE 11. Name(s) of General Partner(s) 11a. Accepts of Earth General Partner (Do NOT Use Post Office Box Numbers) 11b. City, State 4.2p Code 11c. Registration/ Docurrent Numb FEINBERG, LOUIS 200 E NEW ENGLAND AV WINTER PARK FL 32789 0RLANDO FL 32801 MARKS, ROBERT O. 200 E. ROBINSON ST.#8 ORLANDO FL 32801 222 1 5.2- -12./24/19/8-01074-000 *****185.75 Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner ary data by of non-constraints state by florid by of mono-constraints in State by florid by and does not qualify for indered and exampt for public states. If their cortify that is information in dealed to corporations form any data by of non-constraints state by florid by and users that the information in dealed and the information in dealed the information in dealed the information in dealed	MARKS, ROBERT O.					
ORLANDO FL 32801 City Image: City	200 E. ROBINSON ST.		Street Address (P.O.	iss (P.O. Box Number Is Not Acceptable)		
City Lig Code 10a. FL City 10a. City FL City 10a. City FL City City City FL City City City FL City FL FL City City <td< td=""><td></td><td colspan="2">Suite, Apt.</td><td colspan="2">, etc.</td></td<>		Suite, Apt.		, etc.		
10a. Pursuant to the provisions of sections 520.1051 and 520.1052, Florida Statutes, the above-named limited partnership organized or registrated under the laws of the State of Florida, submitts this state for the purpose of changing its registrated agent, or both, in the State of Florida. Such change was subhorized by its general partner(s). I hereby accept the appointment of registrated agent. I am familiar with, and accept the obligations of section 520.192, Florida Statutes. DATE DATE A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENT MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of General Partner(s) 11. Address of Each General Partner (colspan="2">(colspan="2") Colspan="2">Colspan="2" Partner MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of General Partner(s) 11a. Address of Each General Partner 11b. City, State & Zip Code 11c. Registration/ FEINBERG, LOUIS 200 E NEW ENGLAND AV WINTER PARK FL 32789 0RLANDO FL 32801 Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner of the Division of Corporations to applied with this file is voumplay fumity fumitated and does not qualify of the examption stated in Section 119.07(2)(b); Florida Statutes. Telease the Divis	ORLANDO FL 32801		City EI Zip Code			
11. Name(s) of General Partner(s) 11a. (Do NOT Use Post Office Box Numbers) 11b. City, State & Zip Code 11c. (Do Output Post Office Box Numbers) FEINBERG, LOUIS 200 E NEW ENGLAND AV WINTER PARK FL 32789 MARKS, ROBERT O. 200 E. ROBINSON ST.#8 ORLANDO FL 32801 Image: State	for the purpose of changing its registered office or agent. I am familiar with, and accept the obligation SIGNATURE (Registered Ágent Accepting Appointment)_ A GENERAL PARTNER THAT	r registered agent, or both, in the State of Flor sns of section 620.192, Florida Statutes.	ida. Such change was at	thorized by its general partner(s). I hereby DATEDATE	y accept the appointment of registered	
FEINBERG, LOUIS 200 E NEW ENGLAND AV WINTER PARK FL 32789 MARKS, ROBERT O. 200 E. ROBINSON ST.#8 ORLANDO FL 32801 Identification 200 E. ROBINSON ST.#8 ORLANDO FL 32801 Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner 12. Identification subplied with this fling is volumently funished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any fability or in one-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 indicate this annual report is the and accurate and that my signifure shall her the same legal offects as if mede under cath. I further certify that I am a General Partner of the limited partner of the li		Address of Each Genera	al Partner 11b		11c. Registration/	
MARKS, ROBERT O. 200 E. ROBINSON ST.#8 ORLANDO FL 32801 200002722152- 12/24/98-01074-00 *****105.75 *****165.75 *****165. 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 volumbrily furnished and does not qualify for the examption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any Applied with this filing is volumbrily furnished and does not qualify for the examption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any Applied with Section 119.07(b)(k) in the event that the Information supplied is deemed exampt from public access. I further certify that the information indicate this annual report is two and accurate and that my signature shall had the same legal effects as if made under certify that I am a General Partner of the limited partnership, receiver or a encouraged to mean the section the first section 119.07(a)(b) in the event that the information supplied is deemed exampt from public access. I further certify that the information indicate this annual report is two and accurate and that my signature shall had the same legal effects as if made under certify that I am a General Partner of the limited partnership, receiver or a encourage to mean the section the definition of the advertes.		(Do NOT Use Post Office Be	ox Numbers)	·		
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner (2/24/98-01074-00) *****105.75 *****165. 12. I do hereby carlify that the information supplied with this filling is volumently 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 dability of non-compliance with Section 119.07(8)(k) in the event that the information supplied is deemed exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any dability of non-compliance with Section 119.07(8)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicate this annual report is true and accurate and that my signature shall har the same legal effects as if made under certify that I am a General Partner of the limited partnership, receiver or a emouvered to miscrearly the thorn at semicing the state for the limited partnership, receiver or a emouvered to miscrearly the there for Partner of the limited partnership, receiver or a emouvered to miscrearly the there for Partner of the limited partnership, receiver or a emouvered to his report as genuined by the form a semiced by the form a semiced by the	FEINBERG, LOUIS	200 E NEW ENGLAND A	v w	INTER PARK FL 32789		
 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 volumently furnished and does not qualify for the examption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any dability of non-compliance with Section 119.07(8)(k) in the event that the information supplied is deemed exemption public access. I further certify that the information indicate this annual report is true and accurate and that my signature shall hap the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or any dability of non-complication to the date of SOP. Florida Statutes. 	MARKS, ROBERT O.	200 E. ROBINSON ST.#8	B 0	RLANDO FL 32801		
 Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner 1 do hereby certify that the information supplied with this filing is volumerily 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 fability of non-compliance with Section 119.07(8)(k) in the event that the information supplied is deemed exemption patient is deemed exemption public access. I further certify that the information indicate this annual report is two and accurate and that my signature shall happing same legal effects as if made under certify that I am a General Partner of the limited partnership, receiver or a removable this report as generate SQP. Enclose the same legal effects as if made under certify that I am a General Partner of the limited partnership, receiver or a service to the same service to the same legal effects as if made under certify that I am a General Partner of the limited partnership, receiver or a service to the same service to the same legal effects as if made under certify that I am a General Partner of the limited partnership, receiver or a service to the same legal effects as if made under certify that I am a General Partner of the limited partnership, receiver or an equilation of the same legal effects as if made under certify that I am a General Partner of the limited partnership, receiver or a service to the same legal effects as if made under certify that I am a General Partner of the limited partnership, receiver or a service to the same legal effects as if made under certify that I am a General Partner of the limited partnership. 	£.			20000-		
 Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner 1 do hereby certify that the information supplied with this filing is volumently 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 distility of non-compliance with Section 119.07(8)(k) in the event that the information supplied is deemed exemption public access. I further certify that the information indicate this annual report is true and accurate and that my signature shall hap the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or an event that the information supplied is deemed and partner of the limited partnership, receiver or an event that the information supplied is deather to a securite the formation for the limited partnership, receiver or an event that the information and the information supplied is deather to an another the information of the limited partnership, receiver or an event the limited partner of the limited partnership, receiver or an event the information of the limited partnership. 				-12/2	4/98-01074-00c	
 Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner 1 do hereby certify that the information supplied with this filing is volumently 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 distility of non-compliance with Section 119.07(8)(k) in the event that the information supplied is deemed exemption public access. I further certify that the information indicate this annual report is true and accurate and that my signature shall hap the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or an event that the information supplied is deemed and partner of the limited partnership, receiver or an event that the information supplied is deather to a securite the formation for the limited partnership, receiver or an event that the information and the information supplied is deather to an another the information of the limited partnership, receiver or an event the limited partner of the limited partnership, receiver or an event the information of the limited partnership. 				朱永永太:	185.75 ****165.75	
 Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner 1 do hereby certify that the information supplied with this filing is volumently 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 ability of non-compliance with Section 119.07(b)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicate this annual report is true and accurate and that my signature shall har the same legal effects as if made under carth. I further certify that I am a General Partner of the limited partnership, receiver or a general partner of the limited partnership. 	-		ĺ			
12. I do hereby certify that the information supplied with this filling is volumently 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 ability of non-compliance with Section 119.07(B)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicate this annual report is true and accurate and that my signature shall had the same legal effects as if made under cath. I further certify that I am a General Partner of the limited partnership, receiver or emoving the report as repute this report as general partners of the limited adaption.	ي ال ار					
12. I do hereby certify that the information supplied with this filips 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 ability of non-compliance with Section 119.07(8)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicate this annual report is two and accurate and that my signature shall have the same legal effects as if made under carth. I further certify that I am a General Partner of the limited partnership, receiver or emotion and the same legal effects as if made under carth. I further certify that I am a General Partner of the limited partnership, receiver or an emotion of the same legal effects.	Note: General partners MAY NO	T be changed on this form	n: an amendm	ent must be filed to cha	inge a general partner.	
	12. I do hereby certify that the information supplied with Corporations from any fability of non-compliance with this annual report is true and accurate and that my of the second se	this filling is voluntarily furnished and does not ith Section 119.07(8)(k) in the event that the ini signature shall have the same legal effects as i	qualify for the exemption formation supplied is dee	n stated in Section 119.07(3)(k), Florida St med exempt from public access. I further ter certify that I am a Goneral Partner of th	atutes. I release the Division of certify that the information indicated on ne limited partnership, receiver or trustee	
SIGNATURE DATE	SIGNATURE	<u> </u>		DATE	415171	