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

1. Name of Limited Partnership

DOCUMENT# A17842

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GARY WAKSTEIN FAMILY LIMITED PARTNERSHIP							
Mailing Address		Principal Office Address		3. Date Formed or Registered	5a. Capital Coulributions as Shown on record		
4412 DELWOOD LANE PANAMA CITY FL 32408		1605 WALOO LANE P O BOX 27302 PANAMA CITY BEACH FL 32411		09/13/1984 3a. Date of Last Report	\$950.00		
				12/31/1997 4. State or Country of Foundation			
2. Mailing Address		2a. Principal Office	Address	FL	☐ Applied For ☐ Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc		6. FEI Number			
City & State		City & State		59-2438156 7. Certifi, ato of Status Desire (\$8.75 Additional		
Zip	Country	Zip	Country	8. Miki eth i payable to Dept. o	Fee Request of State (See to a iso so to for fee information)		
9. N	ame and Address of C	urrent Registered Agent		10. If changed, new Registered Agent/Office			
WAKSTEIN, GARY			Name	Name			

1605 WALOO LANE Suite Apt # et-PANAMA CITY BEACH FL 32407 10a. Pursuant to the provisions of sections 620 1051 and 620 109. 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). Thereby a crept the appointment of registered

agent I am familiar with, and accept the obligations of section 620 192, Florida Statutes

SIGNATURE (Registered Agent Accepting Approintment)_

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)

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

City State & Zip Code 11b.

Registration 11c. Dogument Number

WAKSTEIN, GARY

1605 WALOO LANE

PANAMA CITY BCH. FL

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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 filling is voluntarily furnished and does not qualify fur the exemption stated in Section 119 07(3)(k). Florida Scitutes Tirelcase 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 exemple from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature ship have the same legal effects as if made under oath. I further certify that I am a General Platner of the limited partnership, receiver or trusted empowered to execute this report as required by charges 50 of Plorida Statutes.

SIGNATURE _

Typed or Printed Name of General Partner Signing Form .

BALLY CULATESTEIN Day me Telephone Number 350 234. 61/2