FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

A21173	1	To DOCUM	1a. DOCUMENT #		7 PA 1:03	
Meling Address Meling Address TAMPA FL 39802 Again and Address Ze. Principal Office Address TOT SOUTH HARBOUR ISLAND BOULEVARD SUITE 977 TAMPA FL 39802 TAMPA FL 39802 Again and Address Ze. Principal Office Address Ze. Principal Office Address Total Committed Commit	Name of Limited Partnership			F 100(0)) (0)0 (100) (1000)	- Pagg hiri bibli bibih bibih bibih bibih bibih idal	
Mairing Address Principal Office Address Try SOUTH HARBOUR ISLAND BOULEVARD SUITE 877 TAIPA FL 39802	CHILDRESS-HARROD #5 LIM	IITED PARTNERSHIP				
The Cultin Harbour Island Boulevand Sure 97 TAMPA FL 3802 2. Melling Address 2. Principal Office Address 2. Melling Address 2. Principal Office Address 2. Melling Address 2. Melling Address 2. Melling Address 2. Surile, Apl. 4, etc. City & State City & State City & State City & State Tourity 2. Name and Address or Current Registered Agent 1. Name 1. Surile, Apl. 4, etc. 9. Name and Address or Current Registered Agent 1. Name 1. Surile, Apl. 4, etc. 1. Surile, Apl. 4, etc. 1. Surile, Apl. 4, etc. City & State Tourity 8. Make check payable to Dept. of State (See rewrine side for the Information 9. Name and Address or Current Registered Agent 1. Name 1. Surile, Apl. 4, etc. 1. Surile, Apl.	_			001/9	\$156.25	
SUITE 87 TAMPA FL 33802 2. Malling Address 3. FE Number TX Suite, Apt. #, etc. 3. FE Number T5-2061125 7. Certificate of Status Desired T5-2061125 7. Certificate of Status Desired T6-8eptived T6-8	Mailing Address	Principal Office Address		3. Date Formed or Registered	58. Capital Contributions as Shown on record.	
Sulfie And Process Sulfie And Sulfie S					\$19.00	
2. Malling Address		- * · · - · · ·				
Suite, Apt. #, etc. City & State City & State City & State Country Zip Country Zip Country Zip Country Zip Country Zip Country Applied For 75-2061125 7. Cortificate of Status, Desired 8. Make check payable to Dept. of State (See reverse able for fee Information 9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number 1974 Agent 1972 - 1972 - 1975 -					Contributions in FLORIDA to date	
Suite, Apt. #, etc. City & State Country Country To Country E, Aprilicate of Status Desired B, Make check payable to: Dept. of State (See reverse alide for fee Information 9. Name and Address of Current Registered Agent HARROD, GARY W. 777 SOUTH HARBOUR ISLAND BOULEVARD Surfie 877 TAMPA FL 33802 City City City City City City City City FL City F	2. Malling Address	28. Principal Office Address	28. Principal Office Address			
City & State City & State Country Zip Country Zip Country R. Make check payable to: Dept. of State (See reverse alde for fee information for highly red for the provision of section 620 105; and 620 192, Foride Statutes, the above name limited partnership organized or registered Agent Office Sunta State (See reverse alde for fee information for highly red for the provision of sections 620 105; and 620 192, Foride Statutes, the above name limited partnership organized or registered under the laws of the State of Florida, Statutes. A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(a) of General Partner(s) 11a, October 11a,	Sulte, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		Applied For	
Zip Country Zip Country B. Make check payable to: Dept. of State (See reverse adde for fee information 9, Name and Address of Current Registered Agent 10. If changed, now Registered Agent/Office HARROD, GARY W. 777 SOUTH HARBOUR ISLAND BOULEVARD SUITE 877 TAMPA FL 33802 City FL Zip Code 108. Pursuant to the provisions of sections 620 1051 and 620 192. Forde Statutes, the above named limited partnership organized or registered under the lews of the State of Florida, submits this statement for the purpose of changing its 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 and florida Agent Accepting Appointment) 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) 118. (address of Sear General Partners) 119. City, State & Zip Code 110. Registration TAMPA FL For Required 110. If changed, now Registered Agent/Decomposition of Section 100 (100 (100 (100 (100 (100 (100 (100	City & State	City & State	City & State		Not Applicable	
Name and Address of Current Registered Agent 10, If changed, new Registered Agent/Office	Zip Country	Zip	Zip Country		\$8.75 Additional Fee Required	
HARROD, GARY W. 777 SOUTH HARBOUR ISLAND BOULEVARD SUITE 977 TAMPA FL 33802 10a. Provided 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). Thereby accept the appointment of registered agent and familiar with, and accept the obligations of section 620-192. Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment) 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) 11a. Address of Each General Partner (po NOT Use Post Office Box Number) 11b. City. State & Zip Code 11c. Registratory Document Number 11b. SIGNATURE (Registered Agent Accepting Appointment) 11c. Registratory Document Number 11d. Name(s) of General Partner(s) 11d. STAMPA FL 11d. STAMPA FL	·		-	8. Make check payable to: Dept. of	State (See reverse side for fee information)	
HARROD, GARY W. 777 SOUTH HARBOUR ISLAND BOULEVARD SUITE 677 TAMPA FL 33602 10a. Pursuant to the provisions of sections 620 1051 and 620 192. Floride 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 aligne. Or registered agent, or both, in the State of Florida. Such change was sutmoized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.182, Piorida Statutes. SIGNATURE (Registered Agent Accepting Appointment) 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) 11a. Address of Each General Partner MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11b. City. State & Zip Code 11c. Registration/ Document Number 11b. City. State & Zip Code 11c. Registration/ Document Number 11de/9801022002 ******************************	9. Name and Address of Curre	ent Registered Agent		10. If changed, new Registere	d Agent/Office	
Street Address (P.C. Box Number By 13 gages) 2 4 12 5 5 5 - 001 1 (15/98 - 01022 - 001) SUITE 877 TAMPA FL 33802 10a. Pursuant to the provisions of sections 620 1051 and 620 192. Floride Statutas, 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 Statutas, the above-named limited partnership organized or registered under the laws of the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. 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) 11a. (Do NOT Use Post Office Box Numbers) 11b. City, State & Zip Code 11c. Registrator/ Document Number 11b. City State & Zip Code 11c. Registrator/ Document Number 11d. (Signate A Zip Code) 11d. (Signate A	HARROD GARY W					
SUITE 877 TAMPA FL 33802 City FL Zip Code 10a. Pursuant to the provisions of sections 620 1051 and 620 192, Floride 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 accepting Appointment. 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) 11a. Address of Each General Partner (b) 11a. (Do NOT Use Post Office Box Numbers) 11b. City. State & Zip Code 11c. Pagistration/Document Number HARROD, GARY W. 777 S. HARBOUR ISLAND TAMPA FL SUINES ENTITY ######\$52, 50 ######\$52, 50	777 SOUTH HARBOUR ISLAND BOULEVARD SUITE 877					
TAMPA FL 33802 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) 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) 11a. Address of Each General Partner 11b. City, State & Zip Code 11c. Registration/Document Number HARROD, GARY W. 777 S. HARBOUR ISLAND TAMPA FL SIGNATURE (Registered Agent Accepting Appointment) TAMPA FL SIGNATURE (Registered Agent Accepting Appointment of registered agent. I appoint agent agent agent appointment of registered agent. I appoint agent age			I Suite Ant # etc			
10a, Pursuant to the provisions of acctions 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 diffice 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) 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) 11a. Partner(s) I1a. Partner(s) I1a. Partner(s) TAMPA FL SCIOUCIA 40.26.36.— TAMPA FL SCIOUCIA 40.26.36.— SCIOUCIA 40.26.36.— ***********************************			City	Zin Code		
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) 11a. Address of Each General Partner (po NOT Use Post Office Box Numbers) 11b. City. State & Zip Code 11c. Registration/ Document Number 11b. TAMPA FL 11c. Registration/ Document Number 11d. Document Number 11d. Document Number 11d. Partner(s) 11d. Par	for the purpose of changing its registered office	or registered agent, or both, in the State of F			he State of Florida, submits this statement	
11. Name(s) of General Partner(s) 11a. Address of Each General Partner 11b. City. State & Zip Code 11c. Registration/ Document Number		TIO A CORPORATION	LUMBER DAG			
HARROD, GARY W. 777 S. HARBOUR ISLAND TAMPA FL SOCIO-24025-365 -01/16/9801022-002 ******S2.50 ******S2.50	A GENERAL PARTNER THA MU:	T IS A CORPORATION, ST BE REGISTERED A	ND ACTIVE W	TINERSHIP OR OTHE TITH THIS OFFICE.	R BOSINESS ENTITY	
600024026365 -01/16/9801022002 *****52.50 *****52.50	11. Name(s) of General Partner(s)	11a. Address of Each Gene (Do NOT Use Post Office	eral Partner Box Numbers) 11b	City, State & Zip Code		
-01/16/9801022002 *****52.50 *****52.50	HARROD, GARY W.	777 S. HARBOUR ISLAI	ND T	AMPA FL		
-01/16/9801022002 *****52.50 *****52.50						
Note: General partners MAY NOT be changed on this form: an amendment must be filed to change a general partner.			;	-01/16	4026365 /9801022002	
Note: General partners MAY NOT be changed on this form: an amendment must be filed to change a general partner.	÷					
rester content parameter that the content of the co	Note; General partners MAY NO	T be changed on this for	rm; an amendm	nent must be filed to cha	ange a general partner.	

12. I do hereby certify that the information supplied with this filling 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 eath. I further certify that I am a General Partner of the limited partnership, receiver or trustee employered to execute this report as followed by chapter 620, Florida Statutes.

W. HARROD

813-229-1500

Daytime Telephone Number