

**FILE ON OR BEFORE APRIL 8, 1998 TO AVOID
REVOCATION AND \$500 PENALTY FEE**

**LIMITED PARTNERSHIP
ANNUAL REPORT
1998**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 FEB 23 PM 4: 06



1. Name of Limited Partnership	1a. DOCUMENT # A21726
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KEY WEST HAND PRINT FABRICS, LTD.

Mailing Address 601 DUVAL STREET SUITE 5 KEY WEST FL 33040		Principal Office Address 601 DUVAL STREET SUITE 5 KEY WEST FL 33040		3. Date Formed or Registered 12/31/1985	5a. Capital Contributions as Shown on record. \$216,000.00
2. Mailing Address 201 Front Street Suite 310 Key West, FL 33040 Monroe		2a. Principal Office Address 201 Front Street Suite 310 Key West, FL 33040 Monroe		3a. Date of Last Report 09/16/1996	
				4. State or Country of Formation FL	5b. Amount of Capital Contributions in FLORIDA to date:
				6. FEI Number 59-2593085	☐ 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 MOSHER, GERALD R. 8 KEY LIME SQUARE KEY WEST FL 33040	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) 201 Front Street Suite, Apt. #, etc. Suite 310 City Key West FL Zip Code 33040
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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), 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)

100002445241-8
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*****526.25 *****526.25

**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 (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/Document Number
SWIFT, EDWIN O., III	601 DUVAL ST #5 201 Front St, Suite 310	KEY WEST FL 33040	
BELLAND, CHRISTOPHER C.	44 FLORA	KEY WEST FL 33040	
MOSHER, GERALD R.	8 KEY LIME SQ. 201 Front St, Suite 310	KEY WEST FL 33040	
CURRY, GREGORY	1201 19TH TERR	KEY WEST FL 33040	

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

DATE

2/16/98

Edwin O. Swift III

Phone Telephone Number

(305) 294-3225

CR2E003 (12/97)