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

DIVISION OF CORPORATIONS

98 DEC - | AMIL: 16

		⊣			
1. Name of Limited Partnership	1a. DOCUMENT # A21767			' ^{All} II: 16	
J. R. PROPERTIES, LTD.			2012/2		
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.	
1713 MAHAN DR.	1713 MAHAN DR.		12/31/1985	\$360,000.00	
TALLAHASSEE FL 32308	TALLAHASSEE FL 32308		3a. Date of Last Report	Ψ300,000.00	
			11/24/1997	5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	to date:	
Z. Waning Address	Add Thropar Office Address		FL	360,000.00	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For	
City & State	City & State		59-2575213	☐ Not Applicable	
	71-	ountry	7. Certificate of Status Desired	\$8.75 Additional Fee Required	
Zip Country	Zip Co	ound y	8. Make check payable to: Dept. of S	State (See reverse side for fee information)	
Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office					
9. Name and Address of Current Registered Agent Name		Name	IV. II CHAINED, HOW ROSINGED ASSERVABLES		
WEIDNER, RICHARD A. Street As		Street Address (P.O.	Box Number is Not Acceptable)		
1713 MAHAN DR.	Dilly A-A				
TALLAHASSEE FL 32308	Suite, Apt. #				
City		City	FL Zip Code		
10a. Pursuant to the provisions of sections 620.1051 and 6 for the purpose of changing its registered office or regagent. I am familiar with, and accept the obligations of SIGNATURE (Registered Agent Accepting Appointment)	istered agent, or both, in the State of Florida.	mited partnership orç Such change was a	ganized or registered under the laws of the uthorized by its general partner(s). I hereby DATE	State of Fiorida, submits this statement accept the appointment of registered	
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 P.	artner 14h		11c. Registration/	
	,	-			
SERPICO, JOSEPH	2140 ORLEANS DR.	T,	ALLAHASSEE FL		
WEIDNER, RICHARD A.	1713 MAHAN DR.	T,	ALLAHASSEE FL		
			1000027 -12/03/3 ****52	026318 8-0111-015 6.25 ****526.25	
Note: General partners MAY NOT	be changed on this form:	an amendn	nent must be filed to cha	inge 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 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