## FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999



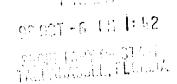
FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

1. Name of Limited Partnership

**DOCUMENT#** 



KODOR A <b>SS</b> OCIATES LI	MITED PARTNERSHIP	94-26		
Malling Address	Principal Office Address	Principal Office Address		5a. Capital Contributions as Shown on record.
11910 GLEN MILL ROAD	11910 GLEN MILL ROAD		04/17/1986	
POTOMAC MD 20854	POTOMAC MD 20854			\$128,700.00
			03/04/1998	5b. Amount of Capital
			4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:
2. Malling Address	2a. Principal Office Address	28. Principal Office Address		\$128,700.00
Sulte, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		Applied For
City & State	City & State	City & State		Not Applicable
			7. Certificate of Status Desired	\$8.75 Additional Fee Required
Zip Country	Zép	Country	8. Make check payable to: Dept. of \$5.26.25	State (See reverse side for fee information)
9. Name and Address of Current Registered Agent			10. If changed, new Registered Agent/Office	
		Name		
DAVIES, CHRISTOPHER N		Street Address (P.O. Box Number is Not Acceptable)		
1415 HENDRY ST. FT. MYERS FL 33902		Suite, Apt. #, etc.		
		City		FL Zip Code
for the purpose of changing its register	620.1051 and 620.192, Florida Statutes, the above-ne ed office or registered agent, or both, in the State of Fine obligations of section 620.192, Florida Statutes.			
	THAT IS A CORPORATION, MUST BE REGISTERED A	LIMITED	PARTNERSHIP OR OTHE	R BUSINESS ENTITY
11. Name(s) of General Partner(s)	11a. Address of Each Gen	and Dades	11b. City, State & Zip Code	11C. Registration/
	122.23			
KOPPEL, GRACE A	11910 GLEN MILL RD.		POTOMAC MD	
•			20854	
•			1000020	562 <b>7</b> 918
			-10/13/ ****52	/9301059020 26.25 ****526.25

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). Floride Statutes. I release the Division of Corporations from any itability 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 applyate 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. Epride Statutes.

SIGNATURE

Grace Anne Dorney Koppel

301-340-0280