

**FILE ON OR BEFORE APRIL 7, 1999 TO AVOID
REVOCATION AND \$500 PENALTY FEE**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

A 24013

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 MAR 19 PM 2:45

LIMITED PARTNERSHIP ANNUAL REPORT 1999		1. Name of Limited Partnership Pitnic Limited		1a. DOCUMENT # A 24013	
Mailing Address Post Office Box 117 Jay, Florida 32565		Principal Office Address Highway 4 East Jay, Florida 32565		3. Date Form is Reported 12/30/86	
2. Mailing Address Post Office Box 117 Suite, Apt #, etc.		2a. Principal Office Address Highway 4 East Suite, Apt #, etc.		3a. Date of Last Report 09/15/97	
City & State Jay, Florida		City & State Jay, Florida		4. State or Country of Formation Florida	
Zip Country 32565 USA		Zip Country 32535 USA		5a. Capital Contributions (in Shares, unless noted) \$146,936.63	
				5b. Amount of Capital Contributed in FLORIDA to date	
				6. FID Number 59-2776277 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
				7. Certificate of Status Due to <input checked="" type="checkbox"/> \$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 John R. Pittman 3936 Country Mill Road Jay, Florida 32565		10. If changed, New Registered Agent/Officer Name Street Address (P.O. Box Number is NOT acceptable) Suite, Apt #, etc. City FL Zip Code	
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10a. Pursuant to the provisions of sections 620.1351 and 629.192, Florida Statutes, the above named limited partnership organization 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) _____ DATE _____
**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 (Due date of Partner)
Mary Pittman	Highway 4 East	Jay, Florida 32565	
Thomas Henry	Highway 4 East	Jay, Florida 32565	
John R. Pittman	3936 Country Mill Road	Jay, Florida 32565	

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(CWS)

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)(b), Florida Statutes. I declare 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. Further, I 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. Further, I 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 John R. Pittman DATE 3/17/99
 Typed or Printed Name of General Partner Signing Form John R. Pittman Daytime Telephone Number (850) 469-0551

CR2E003 (1/2/98)