## 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

1a. DOCUMENT # A24255

## FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 OCT 12 PH 4: 10

	A24255					
FIRST RESERVE LIMITED PARTNERSHIP-1988						
	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record. \$2,492,500.00  5b. Amount of Capital Contributions in FLORIDA		
LVD <b>S</b> UITE 225	9200 SOUTH DADELAND BLVD SUITE 225 MIAMI FL 33156		03/10/1987 3a. Date of Lest Report 10/27/1997			
. Malling Address 2a. Principal Office Address			4. State or Country of Formation			
	Suite, Apt. #, etc.		6. FEI Number	<u>l</u>	Applied For Not Applicable	
			7. Certificate of Status Desired		\$8.75 Additional Fee Regulred	
Country	Zip Country		8, Make check payable to: Dept. of State (See reverse side for fee Information			
ame and Address of Current Re	<u> </u>	·	10. If changed, new Registered	d Agent/Office		
CUMMINGS, F. ALAN CUMMINGS LAW FIRM 1004 DESOTO PARK DR. TALLAHASSEE FL 32301		Street Address (P.O. Box Number Is Not Acceptable)  Suite, Apt. #, etc.  City  FL Zip Cont.				
anging its registered office or reg with, and accept the obligations of ant Accepting Appointment)	stered agent, or both, in the State of Floride. section 620.192, Floride Statutes.  S A CORPORATION, LII	Such change wa	ps authorized by its general partner(s). I hereby DATE  ARTNERSHIP OR OTHE	y accept the m	ppointment of registered	
et Partner(s)	11a. Address of Each General P. (Do NOT Use Post Office Box N	artner Numbers) 11	1b. Cliy, State & Zip Code	11c.	Registration/ Document Number	
, INC.		9200 SOUTH DADELAND B		P9	P95000008523	
			-10/14	4/₿8- <b>-C</b>	9981 1085012 ****\$26.25	
	Country  Iame and Address of Current Re  N  RM  K DR.  2301  Islons of sections 620.1051 and 6 langing its registered office or regindith, and accept the obligations of anti-Accepting Appointment)  PARTNER THAT IS	Principal Office Address  ELVD SUITE 225  \$200 SOUTH DADELAND BLVD SUIMIAMI FL 33156   28. Principal Office Address  Suite, Apt. #, etc.  City & State  Country  Zip  Country  Zip  Country  Country  Zip  Country  Country  Zip  Country  Country  Zip  Country  Address of Current Registered Agent  N  RM  K DR.  2301  Islans of sections 620.1051 and 620.192, Florida Statutes, the above-named in anging its registered office or registered agent, or both, in the State of Florida with, and accept the obligations of section 620.192, Florida Statutes.  Country  PARTNER THAT IS A CORPORATION, LIMUST BE REGISTERED AND  at Partner(e)  118. Address of Each General P  118. (Do NOT Use Post Office Box	Principal Office Address  LVD SUITE 225  8200 SOUTH DADELAND BLVD SUITE 225  MIAMI FL 33156   28. Principal Office Address  Suite, Apt. #, etc.  City & State  Country  Zip  Country  Liame and Address of Current Registered Agent  Name  Street Address ( Suite, Apt. #, etc.  City & State  Country  Liame and Address of Current Registered Agent  Name  Street Address ( Suite, Apt. #, etc.  City  Lisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership anging its registered office or registered agent, or both, in the State of Florida. Such change we with, and accept the obligations of section 620.192, Florida Statutes.  PARTNER THAT IS A CORPORATION, LIMITED PARTNER THAT IS A CORPORATION, LIMITED PARTNER THAT IS A CORPORATION, LIMITED PARTNER THAT IS A CORPORATION ACTIVE  at Partner(e)  118. Address of Each General Partner  (Do NOT Use Post Office Box Numbers)	Principal Office Address  Principal Office Address  3. Date Formed or Registered  03/10/1987  3a. Date of Lest Report  10/27/1997  4. State or Country of Formation  FL  Suite, Apt. #, etc.  City & State  Country  Zip  Country  Zip  Country  RM  Street Address of Current Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, etc.  City  RM  K DR.  2301  City  Interest and Status Desired  Suite, Apt. #, etc.  City  Cit	Principal Office Address  AUD. SUITE 225  Principal Office Address  \$200 SOUTH DADELAND BLVD. SUITE 225  MIAMI FL 33156   2a. Principal Office Address  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  Country  Zip  Country  Zip  Country  Zip  Country  Zip  Country  August and Address of Current Registered Agent  Name  N  Streel Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, etc.  City  Suite, Apt. #, etc.  City  Ribon  Streel Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, etc.  City  FL  S	

Note: General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner.

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 significant the same legal effects as if made under ceth. I further certify that I am a General Partner of the limited partnership, receiver or trustee

CR2E003 (8/98)

Daytime Telephone Number

Typed or Printed Name of General Partner Signing Form

SIGNATURE

empowered to execute this report as pequired by chapter 620. Florida statutes.