## 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

1. Name of Limited Partnership

**DOCUMENT#** A24489

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA



THONE HOOTENS, LID.	48	-HK	n	
Mailing Address  26133 U.S. HWY. 18 NORTH SUITE 100 CLEARWATER FL 34623-2019	Principal Office Address 26133 U.S. HWY. 19 NORTH SUITE 100 CLEARWATER FL 34623-2019		3. Date Formed or Registered 04/27/1987 38. Date of Last Report 10/18/1996	5a. Capital Contributions as Shown on record. \$230,000.00  5b. Amount of Capital Contributions in FLORIDA
2. Mailing Address 26133 U.S. Hwy. 19 North	28. Principal Office Address 26133 U.S. Hwy.	19 Nort	4. State or Country of Formation	to date:  34,150.00
Sulte, Apt. #, etc. Sulte 100 City & State	Suite, Apt. #, etc. Suite 100 City & State		6. FEI Number 59-2797632	Applied For Not Applicable
Clearwater, FL Zip Country 33763-2019 USA	Clearwater, FL Zip 33763-2019	Country USA	7. Certificate of Status Desired  8. Make check payable to: Dept. of	\$8.75 Additional Fee Required  Stale (See reverse side for fee information)
9. Name and Address of Current F	legistered Agent	T	10. If changed, new Registere	d Agent/Office
KIEFER, NEIL G ESQ. RIDEN, EARLE & KIEFNER, P.A. 100 2ND AVENUE SOUTH, SUITE 400 NORTH ST. PETERSBURG FL 33701		Neme Neil G. Kiefer, Esquire Street Address (P.O. Box Number is Not Acceptable) 26133 U.S. Hwy. 19 North Suite. Apt. #, etc. Suite 100 City Clearwater FL Zip Code 33763-2019		
10a. Pursuant to the provisions of sections 620 1051 and for the purpose of changing its registered office or reagent. I am familiar with, and accept the obligations of SIGNATURE (Registered Agent Accepting Appointment)  A GENERAL PARTNER THAT II  MUST	gistered agent, or both, in the State of Flor of section 620.192, Florida Statutes.  S A CORPORATION, L BE REGISTERED AN	IMITED	nge was authorized by its general partner(s). I her  Neil G. Kiefer DATE	eby accept the appointment of registered  3/3/98
11. Name(s) of General Partner(s)	11a. (Do NOT Use Post Office Bo	l Partner x Numbers)	11b. City. State & Zip Code	11c. Registration/ Document Number
HOOTER (II, INC.	26133 U.S. HWY. 19 NO		CLEARWATER FL 34623 90002 -03/24 ****5	J48934  4572195 /3801103017 26.25 ****526.25
Note: General nurtuers MAY NOT	ne changed on this form	o en em	andment must be filed to che	ange a general nartner
Note: General partners MAY NOT be changed on this form; an amendment must be filled 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 hability of non-dompliance 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 grait 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 30. Florida Statutes.  SIGNATURE  DATE  3/3/98				
	Hooters III, Inc.			24.23 705 2554