## FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

98-AR

1. Name of Limited Partnership

BERNARD EGAN LTD.

1a. DOCUMENT # **A26060** 

97 DEC 11 PM 2: 49 SEURETARY OF STATE TALLAHASSEE, FLORIDA

FILED



		CM
Mailing Address	Principal Office Address	
1900 OLD DIXIE HIGHWAY	1800 OLD DIXIE HIGHWAY	
FT. PIERCE FL 34946	FT. PIERCE FL 34946	

T. PIERCE FL 34946	FT. PIERCE FL 34946		
¢ ·			
2. Malling Address	2a. Principal Office Address		
Sulte, Apt. #, etc.	Suite, Apt. #, etc.		
City & State	City & State		
Zip Country	Zin Country		

ı	3. Date Formed of Registered	Shown on record.
ĺ	03/08/1988	<b>6474</b> 000 00
	3a. Dalo of Last Report	\$171,629.00
	02/07/1997	5b. Amount of Capital Contributions in FLORIDA
	4. State or Country of Formation	to date:
		1

State or Country of Formation	to date:		
FL	\$274,429.00		
FEI Number	<u> </u>		
65-0033161	Applied For Not Applicable		
. Certificate of Status Desired	\$8.75 Additiona		

8. Make check payable to: Dept. of State (See reverse side for fee Information)

9. Name and Address of Current Registered Agent	10. If changed, new Registered Agent/Office		
ON, GREGORY P	Name Street Address (P.O. Box Number Is Not Acceptable)		
OLD DIXIE HIGHWAY PERCE FL 34948	Suite, Apt. #, etc.		
	City Zip Code		

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutos, the above-named limited partnership organized 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). Thereby accept the appointment of registered agent. I am tamiliar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

NEL 1900 FT. 1

DATE

## A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

MOST DE NEGISTERED AND ACTIVE WITH THIS OFFICE.						
11. Name(s) of Gonoral Partner(s)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number			
EGAN, BERNARD A	1900 OLD DIXIE HIGHWA	FT. PIERCE FL				
BERNARD EQAN & COMPANY	1900 OLD DIXIE HIGHWA FT. PIERCE FL		535018			

900002378189--2 -12/19/97--01092--014 \*\*\*\*\$411.25 \*\*\*\*\$41.25

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), 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 logal effects as if made under eath. I further certify that I am a General Partner of the limited partnership, receiver or trusted empowered to execute this apport as required by chapter 620, Florida Statutes

Typed or Printed Name of General Partner Signing Form

Bernard A. Egar

...... DATE \_ 12 8 91

one Number 561**–4**65–755!

CHZE003 (6/97)