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

FILED

1. Name of Limited Partnership

1a. DOCUMENT # A28012

CENTRAL FLORIDA INVESTMENT PARTNERS, LTD.

Mailing Address
13809 RESEARCH BLVD., SUITE 1000
AUSTIN TX 78750

Principal Office Address
13809 RESEARCH BLVD. SUITE 1000
AUSTIN TX 78750

3. Date Formed or Registered: 03/06/1989
3a. Date of Last Report: 05/26/1998
4. State or Country of Formation: FL
5a. Capital Contributions as Shown on record: $2,600,000.00
5b. Amount of Capital Contributions in FLORIDA to date: 2,600,000.00
6. FEI Number: 59-2939527
☐ Applied For
☐ Not Applicable
7. Certificate of Status Desired ☐ $8.75 Additional Fee Required
8. [illegible]

2. Mailing Address
Suite, Apt #, etc
City & State
Zip Country

2a. Principal Office Address
Suite, Apt #, etc
City & State
Zip Country

9. Name and Address of Current Registered Agent

POHL, BROWN AND ASSOC. OF FLORIDA, INC.
1520 ROYAL PALM SQUARE BLVD., SUTIE 360
FORT MYERS FL 33919

10. If changed, New Registered Agent/Office
Name
Street Address (P.O. Box Number Is Not Acceptable)
Suite, Apt #, etc
City FL Zip Code

-02/03/99--01068--022
****526.25 ****526.25

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, 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). 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/Document Number
TEXAFLOR, INC.	13809 RESEARCH BLVD.,	AUSTIN TX 78750	P95000036425

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 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, Florida Statutes.

SIGNATURE [signature] DATE 12/3/98

Typed or Printed Name of General Partner Signing Form: William B. Pohl

Daytime Telephone Number: (512) 335-5574

CR2E002 (8/98)