

**FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

**LIMITED PARTNERSHIP
ANNUAL REPORT
1997**



FLORIDA DEPARTMENT OF STATE
Sandra Mortham
Secretary of State
DIVISION OF CORPORATIONS

96 DEC 17 PM 4:16

STATE OF FLORIDA
TALLAHASSEE, FLORIDA



9/12/19

1. Name of Limited Partnership
1a. DOCUMENT #
A28499

FOREST RUN PARTNERS, LTD.

Mailing Address
% SAMCO PROPERTIES, INC.
10 FAIRWAY DR., #303
DEERFIELD BEACH FL 33441

Principal Office Address
6954 KATHY LANE
MARGATE FL 33064

3. Date Formed or Registered
06/19/1989

**5a. Capital Contributions as
Shown on record**
\$2,550,000.00

3a. Date of Last Report
12/14/1995

4. State or Country of Formation
FL

**5b. Amount of Capital
Contributions in FLORIDA
to date**

2. Mailing Address

2a. Principal Office Address

6. FEI Number
59-2649722

☐ Applied For
☐ Not Applicable

7. Certificate of Status Desired

☒ **\$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

SPIEGEL, SAM
%SAMCO PROPERTIES, INC.
10 FAIRWAY DR., #303
DEERFIELD BEACH FL 33441

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc.

City

FL

Zip Code

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**

SPIEGEL, SAM

10 FAIRWAY DR., #303

DEERFIELD BEACH FL

0000020302301-15
12/20/96-01021-1021
***585.00 ***585.00

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). I further certify 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

DATE

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number