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

LIMITED PARTNERSHIP ANNUAL REPORT 1997

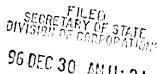
Typed or PriAted Name of General Partner Signing Form



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State
DIVISION OF CORPORATIONS



Mailing Address C/O KINCO INC. C/O K	1. Name of Limited Partnership	1a. DOCUI A29550	MENT #			
C/O KINCO INC. P.O. BOX 6428 JACKSOMVILLE FL 32236 2. Mailing Address 3. State 2. City & State 2. City & State 2. Country 3. Maile check payable to Dept of State Street Agent To Contribute Contr	KINCO, L.TD.	 				
3. Date of Lear Report 01/08/1996 2. Mailing Address 2. Suite, Apt. #, etc. 3. Suite, Apt. #, etc. 4. State or Country of Formation FL City & State 2. Country 3. Make check payable to Digit of Status Desired 3. Make check payable to Digit of Status Desired 3. Make check payable to Digit of Status (See reverse Part Address of Current Registered Agent) 3. Make check payable to Digit of Status (See reverse Part Address of Current Registered Agent) 3. Make check payable to Digit of Status (See reverse Part Address of Current Registered Agent) 3. Make check payable to Digit of Status (See reverse Part Address of Current Registered Agent) 3. Make check payable to Digit of Status (See reverse Part Address (P.O. Box Number is Not Acceptable) 3. Make check payable to Digit of Status (See reverse Part Address (P.O. Box Number is Not Acceptable) 4. State of Port Address (P.O. Box Number is Not Acceptable) 5. Suite, Apt. #, etc. City 5. City 6. Fit Number (F.O. Box Number is Not Acceptable) 5. Suite, Apt. #, etc. City 7. Currificate of Status of Port Address (P.O. Box Number is Not Acceptable) 5. Suite, Apt. #, etc. City 7. Currificate of Status of Port Address (P.O. Box Number is Not Acceptable) 7. Fig. 2 7. Currificate of Status of Port Address (P.O. Box Number is Not Acceptable) 7. Fig. 2 7. Currificate of Status of Port Address (P.O. Box Number is Not Acceptable) 7. Fig. 2 7. Currificate of Status of Port Address (P.O. Box Number is Not Acceptable) 7. Fig. 2 7. Currificate of Status of Status of Port Address (P.O. Box Number is Not Acceptable) 7. Currificate of Status of Port Address (P.O. Box Number is Not Acceptable) 7. Currificate of Status of Status of Port Address (P.O. Box Number is Not Acceptable) 7. Currificate of Status of Status of Port Address (P.O. Box Number is Not Acceptable) 7. Currificate of Status of Status of Port Address (P.O. Box Number is Not Acceptable) 7. Currificate of Status of Status of Port Address (P.O. Box Number i	C/O KINCO INC.	20 INC. C/O KINCO INC. 8429 P.O. BOX 6429			5a. Capital Contributions as Shown on record.	
2. Mailing Address 2a. Principal Office Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Zip Country Zip Country Zip Country A Make check payable to Dept. of Status Desired Registered Agent 10. If changed, new Registered Agent/Office C T CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Side, Apt. #, etc. City The Status Desired Status Desired Street Address (P.O. Box Number is Not Acceptable) FL Zib The Status of Princia, for the purpose of changing its registered office or registered agent, or both, in the State of Forida. Such change was authorized by its general partner(s). I hereby accept the apagent I am lamikar with, and accept the obligations of section 820 192. Florida Statutes A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINI MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of General Partner(s) 11a. (In Address (P.O. Box Number) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINI MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of General Partner(s) 11a. (In Address (P.O. Box Number) JACKSONVILLE FL L441					5b. Amount of Capital Contributions in FLORIDA	
City & State Country Zip Country Zip Country Zip Country 8, Make check payable to Dept. of State (See reverse 8, Make check payable to Dept. of State (See reverse 9, Make check payable to Dept. of State (See reverse payabl	2. Mailing Address	2a. Principal Office Address		· ·	to date:	
City & State Zip Country Zip Country 8, Make check payable to Dept of Status Desired 9, Name and Address of Current Registered Agent 10, if changed, new Registered Agent/Office C T CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Suite, Apt *, etc. City FL 2 10a. Fursuant to the provisions of sections 520 1051 and 520, 192, Florida Statutes, the above-named irrited partnership organized or registered under the laws of the State of Florida. Fur hamiliar with, and accept the obligations of section 620, 192, Florida Statutes SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINI MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of General Partner(s) 11a. (po NOT Use First Office Box Numbers) 11b. City, State & Zip Code 11c. 1441 BODDO 20 5 03: -01/08/97010/		Suite, Apt. #, etc.	Suite, Apt. #, etc.		Applied For Not Applicable	
9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office C T CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Suite, Apt *, etc. City FL 7 10a. Pursuant to the provisions of sections 820 1051 and 620, 192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida. For the purpose of chunging 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 apparent Lam lamitar with, and accept the obligations of section 620 192. Florida Statutes SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINI MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of General Partner(s) 11a. (po NOT Use Post Office Box Numbers) 11b. City, State & Zip Code 11c. 1441 City State & Zip Code 11c. 1441			718.4	7. Certificate of Status Desired		
C T CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Suite, Apt **, etc. City FL 2 10a. Pursuant to the provisions of sections 520 1051 and 520 192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida. To 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 api agent I am lamiliar with, and accept the obligations of section 620.192, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINI MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of General Partner(s) 11a. (po NOT Use Post Office Box Numbers) 11b. City, State 8 2p Code 11c. 1441 BODDO205503: -01/08/97010	Zip Country	Ζιρ	Country	8. Make check payable to Dept		
1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Suite, Apt *, etc. City FL 2 10a. Pursuant to the provisions of sections 520 1051 and 520 192, Florida Statutes, the above-named limited partnership organized or registered under the taws of the State of Florida. 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 application of section 520, 192, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINI MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of General Partner(s) 11a. (Do NOT Use Fost Office Box Numbers) L441 SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINI MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of General Partner(s) 11a. (Do NOT Use Fost Office Box Numbers) 11b. City, State & Zip Code 11c. 1 11d. 1441	9. Name and Address of Current Registered Agent			10. If changed, new Registe	ared Agent/Office	
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.	10a. Pursuant to the provisions of sections 620 for the purpose of changing its registered agent. I am familiar with, and accept the opening the control of	office or registered agent, or both, in the State of obligations of section 620, 192, Florida Statutes.	City named limited partners of Florida. Such change	ship organized or registered under the laws on the was authorized by its general partner(s). If the base of the ba	of the State of Florida, submits this statement hereby accept the appointment of registered	
11. Name(s) of General Partner(s) 11a. (Do NOT Use Post Office Box Numbers) 11b. City, State & Zip Code 11c.	A GENERAL PARTNER 1	HAT IS A CORPORATION MUST BE REGISTERED A	I, LIMITED F	PARTNERSHIP OR OTH WITH THIS OFFICE.	IER BUSINESS ENTITY	
8000020503: -01/08/97010					11c. Registration/ Document Number	
	KINCO, INC.	5245 OLD KINGS RO	DAD	800002 -01/0	L44136 20503385 18/9701050014 585.00 ****585.00	
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a gen 12. I do heroby 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 Statules. I release 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 it 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 partner empowered to execute this report as required by chapter 620, Florida Statutes.	 I do heroby certily that the information supp Corporations from any liability of nort complithis annual report is true and accurate and 	olied with this filling is voluntarily furnished and doc liance with Section 119.07(3)(k) in the event that it that my signature shall have the same logal effect	es not qualify for the e he information supplie	xemption stated in Section 119.07(3)(k), Flor d is deemed exempt from public access. I fi	ida Statutes. I release the Division of urther certify that the information indicated or	

KINCO INC. GP. by MACK A. Williams