

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

1. Name of Limited Partnership

1a. DOCUMENT #  
A30563

GRANDE FOUR, LTD.

Mailing Address

P.O. BOX 776435  
STEAMBOAT SPRINGS CO 80477

Principal Office Address

2534 MANIKI DRIVE-  
WEST PALM BEACH FL 33407

2. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

2a. Principal Office Address

15606 87th Terr. N.

Suite, Apt. #, etc.

City & State

Zip

Country

Palm Bch Gardens, Fl.  
33410 USA

3. Date Formed or Registered

09/04/1990

3a. Date of Last Report

10/17/1995

4. State or Country of Formation

FL

6. FEI Number

65-0213327

☐ 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)

5a. Capital Contributions as  
Shown on record.

\$1,600,000.00

5b. Amount of Capital  
Contributions in FL ORIDA  
to date:

9. Name and Address of Current Registered Agent

AKERS, JODY GRIER

2534 MANIKI DRIVE- 15606 87th Terr. N.  
WEST PALM BEACH FL 33407 Palm Bch Gardens,  
Fl.  
33410

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)

JTEC WEST, INC.

11a. Address of Each General Partner  
(Do NOT Use Post Office Box Numbers)

2534 MANIKI DRIVE-  
15606 87th Terr. N. WEST PALM BEACH FL  
Palm Bch. Gardens, Fl.  
33410

11b. City, State & Zip Code

11c. Registration/  
Document Number

L98143

000002039470--6  
-12/27/96--01066--015  
\*\*\*\*576.25 \*\*\*\*576.25

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 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 DEC 12 1996

Typed or Printed Name of General Partner Signing Form

Jody Grier Akers

Daytime Telephone Number

970-879-1282

CR2E003 (6/96)