FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

1. Name of Limited Partnership 1a. DOCUMENT # A30579 SECRETARY OF STATE TALLAHASSEE, FLORIDA OLDE FLORIDA LTD. Mailing Address Principal Office Address 3. Date Formed or Registered 93. Capital Contributions as Shown on record. 93. Date of Last Report 93. Date of Last Report 94. State or Country of Formation FL Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 1. APPlied Formation SECRETARY OF STATE TALLAHASSEE, FLORIDA 1. ABOUT ASSEE, FLORIDA 1. Date of Last Registered 94. State or Country of Formation 1. APPlied FLORIDA 1. APPLIED FL	1999		DIVISION OF CO		s g	JAN -5	PM 4: 30	
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2. Mailing Address 2. A. Principal Office Address 4. Slate or Country of Formation 1, 204, 343.00 Country 5. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Ci					3a. Date of Last Report	09/12/1990 3a. Date of Last Report 01/05/1998 5b. Amount of Capital		
City & State Country To Conflicate of Status Desired \$8.75 Additional Fee Required 8, Make check payable to: Dept. of State (See reverse adds for fee Information 9, Name and Address of Current Registered Agent) Name 10. If changed, new Registered Agent)Office Name Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) Sulfe, Apt. #, etc. City FL 26 Code City FL 26 Code City FL 26 Code City FL 276 Code City					4. State or Country of Formation	4. State or Country of Formation Contributions in FLORIDA to date: 1, 204, 343.00		
Tourity Zip Country Zip Country Zip Country Status Desired \$8.75 Additional Fee Registered \$9.75 Additional Fee Registered			etc.					
9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office JOSEPHSON, LYNN G 9393 VANDERBILT BEACH RD. EXT. NAPLES FL 33964 Suite, Apt. #, etc. City FL Zin Code 3-11/2 o The 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 stateme for the purpose of changing its registered agent, or both, in the State of Floridas. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent agent agent agent. I am familiar with, and accepting Appointment A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTIT MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of General Partner(s) 11a. Address of Each General Partner(s) 11b. City, State & Zip Code 11c. Registratory occurrent Number 11b. City, State & Zip Code 11c. Registratory occurrent Number 11c. Registratory occurrent Number 11d. NAMES FL 33964— 11d. Partnership Company (1) 11d. Partnership Compa				Country	7. Certificate of Status Desired		\$8.75 Additional Fee Required	
JOSEPHSON, LYNN G 9393 VANDERBILT BEACH RD. EXT. NAPLES FL 33964 10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited pertnership organized or registered under the laws of the State of Florida, submits this stateme 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 heroby accept the appointment of registered agent, I am familiar with, and accept the obligations of section 520.192, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of General Partner(s) 11a. Address of Each General Partner OFC OF NAPLES, INC. 9393 VANDERBILT BEACH NAPLES FL 33964 L26009 11C. Registration/ Document Number 125 125 125 125 125 125 125 125 125 125					8. Make check payable to: Dept. o	f State (See reven	se side for fee information)	
JOSEPHSON, LYNN G 9393 VANDERBILT BEACH RD. EXT. NAPLES FL 33964 Suite, Apt. #, etc. City FL 2p Code 3 4// 2 0 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 stateme for the purpose of changing its registered affice 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 Accepting Appointment agent. I am familiar 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 BUSINESS ENTITED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of General Partner(s) 11a. Address of Each General Partner OFC OF NAPLES, INC. 9393 VANDERBILT BEACH NAPLES FL 39964— 126009 11c. Registration/Document Number 11b. City, State & Zip Code 11c. Document Number 11d. 26/133—011/26/133					10. If changed, new Register	10. If changed, new Registered Agent/Office		
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 stateme 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) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of General Partner(s) 11a. Address of Each General Partner (b) NOT Use Post Office Box Numbers) OFC OF NAPLES, INC. 9393 VANDERBILT BEACH NAPLES FL 33964 ***********************************	9393 VANDERBILT BEACH RD. EXT.			Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc.				
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITION 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 15c. Registration/ Document Number 17c. Registration/ Document Number	for the purpose of changing its registe	red office or registered agent, or bo	oth, in the State of Florid	d limited partners		ne State of Florida	34120 , submits this statement	
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(s) of General Partner(s) 11a. Address of Each General Partner (bo NOT Use Post Office Box Numbers) OFC OF NAPLES, INC. 9393 VANDERBILT BEACH NAPLES FL 33964— 126009 11c. Registration/Document Number NAPLES FL 33964— 126009 11c. Registration/Document Number NAPLES FL 33964— 126009 11c. Registration/Document Number 11d. Viv. State & Zip Code 11c. Registration/Document Number 11d. Viv. State & Zip Code 11c. Registration/Document Number 126009 126009 126009 126009 126009 126009 126009 126009 126009 126009 126009 126009 126009 126009 126009 126009 126009								
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300027555839-01/26/1901/25-01/4 *****526.25	11. Name(s) of General Partner(s)	11a A	Address of Each General Partner			11c.	Registration/ = Document Number	
Note: General partners MAY NOT be changed on this form: an amendment must be filed to change a general partner	OFC OF NAPLES, INC.	9393 VA	9393 VANDERBILT BEACH		37/20002	300027555835		
12. I do hereby certify that the information supplied with this filling is voluntarily furnished and dogs 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 guern triaf the information supplied is deemed exempt from public access. I further certify that the information indicated or	12. I do hereby certify that the Information st	upplied with this filling is voluntarily	furnished and does not	qualify for the exc	emption stated in Section 119.07(3)(k), Florida	Statutes, I release	the Division of	

empowered to execute this report as required by chapter 620, Florida Statutes

OFC OF NAPLES, INC.

SIGNATURE 379:

Daytime Telephone Number (971) 353-6779