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

1. Name of Limited Partnership

1a. DOCUMENT # **A30604**

SECRETARY OF STATE DIVISION OF CORPORATION

98 DEC -7 PM 1: 40

DATE 11/16/98

Daytime Telephone Number_

WILT'S OF BOCA RATON, LTD.	

				L INDRENS INDRE TITLE BRICE BASK BURIL BURIL BURIL BURIL BARK BURIL DERI				
Mailing Address	Principal Office Address		3	Date Formed or Registered	5a. Capital Contributions as Shown on record.			
7777 GLADES ROAD, SUITE 310	7777 GLADES ROAD, SUITE 310			09/18/1990		00 000 00		
BOCA RATON FL 33434	BOCA RATON FL 33434		3	a. Date of Last Report	\$1,200,000.00			
				11/14/1997	5b. Amou Contr	nt of Capital butions in FLORIDA		
2. Mailing Address	2a. Principal Office Address		4	State or Country of Formation to date:		= :		
Z. Maning Address	Zea Francipal Office Address			FL	\$1,200,000.00			
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6	FEI Number	Applied For			
City & State	City & State		— <u>—</u>	65-0206479	☐ Not Applicable			
Country	Country		7	Certificate of Status Desired	X	\$8.75 Additional Fee Required		
Zip Country	ZIP	Zip Country		8. Make check payable to: Dept. of State (See reverse side for fee information)				
				40 Is about the Boutetown	A continue			
9. Name and Address of Current Registered Agent		10. If changed, new Registered Agent/Office						
SCHMIER, ROBERT J		Street Address (P.O. Box Number Is Not Acceptable)						
7777 GLADES ROAD, SUITE 310								
BOCA RATON FL 33434		****	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)								
A GENERAL PARTNER THAT IS	S A CORPORATION, L	IMITED P	ARTN	ERSHIP OR OTHE	R BUSI	NESS ENTITY		
MUST	BE REGISTERED ANI	D ACTIVE	WITH	THIS OFFICE.		Registration/		
11. Name(s) of General Partner(s)	11a. Address of Each General (Do NOT Use Post Office Bo		1b.	City, State & Zip Code	11c.	Document Number		
WILT'S PLACE, INC.	7777 GLADES RD., #310		BOCA	30CA RATON FL 33434 \$00392 70002707427— -12/09/98—01069—02 ****535.00 *****53!		0392 27		
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* *								
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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 20, Florida Statutes. Wilts / Place Inc. general partner								

Robert J. Schmier, President