

FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT  
TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP  
ANNUAL REPORT  
1998



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

97 DEC 24 PM 12:16

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1. Name of Limited Partnership

1a. DOCUMENT #  
A30985

SILVER TERRACE ORLANDO, LTD.

Mailing Address

%CANFLOR GENERAL, INC.  
399 CAROLINA AVE., STE. 250  
WINTER PARK FL 32789

Principal Office Address

%CANFLOR GENERAL, INC.  
399 CAROLINA AVE., STE. 250  
WINTER PARK FL 32789

3. Date Formed or Registered

12/24/1990

3a. Date of Last Report

12/17/1996

4. State or Country of Formation

FL

5a. Capital Contributions as  
Shown on record.

\$240,000.00

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

2. Mailing Address

2296 W. Airport Blvd  
Suite, Apt. #, etc.

2a. Principal Office Address

2296 W. Airport Blvd.  
Suite, Apt. #, etc.

City & State

Sanford Fla.

City & State

Sanford, Fla.

Zip

32771

Country

USA.

Zip

32771

Country

USA.

6. FEI Number

52-1713612

☐ 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

CANFLOR MANAGEMENT, INC.  
399 CAROLINA AVE  
SUITE 250  
WINTER PARK FL 32789

10. If changed, new Registered Agent/Office

Name  
Canflor Management, Inc.

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

2296 W. Airport Blvd.

Suite, Apt. #, etc.

City  
Sanford

FL

Zip Code

32771

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

12/15/97

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)

SILVER TERRACE, INC.

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

399 CAROLINA AVE #250  
2296 W. Airport Blvd.

11b. City, State & Zip Code

WINTER PARK FL  
Sanford, Fla. 32771

11c. Registration/  
Document Number

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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 620, Florida Statutes.

SIGNATURE

DATE

12/15/97

Typed or Printed Name of General Partner Signing Form

Dennis Armitage

Daytime Telephone Number

407 644 0575

CR2E003 (6/97)