

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
97 JAN -7 AM 9:05



1. Name of Limited Partnership

1a. DOCUMENT #  
A31379

MARDILA ENTERPRISES, LTD.

Mailing Address

C/C SPINNAKER DEVELOPMENT  
703 17TH STREET  
VERO BEACH FL 32960

Principal Office Address

C/C SPINNAKER DEVELOPMENT  
703 17TH STREET  
VERO BEACH FL 32960

3. Date Formed or Registered  
04/03/1991

5a. Capital Contributions as  
Shown on record.

\$1,210,000.00

3a. Date of Last Report  
05/01/1996

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

1,210,000.00

4. State or Country of Formation  
FL

6. FEI Number  
65-0251067

☐ 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)

2. Mailing Address

C/C SPINNAKER DEVEL  
Suite, Apt. #, etc.  
1162 SO. US #1  
City & State  
VERO BEACH, FL  
Zip  
32962 Country  
USA

2a. Principal Office Address

C/C SPINNAKER DEVEL  
Suite, Apt. #, etc.  
1162 SO. US #1  
City & State  
VERO BEACH, FL  
Zip  
32962 Country  
USA

9. Name and Address of Current Registered Agent

ADAMS, JAMES R  
703 17TH STREET  
VERO BEACH FL 32960

10. If changed, new Registered Agent/Office

Name  
JAMES R. ADAMS  
Street Address (P.O. Box Number Is Not Acceptable)  
1162 SO US #1  
Suite, Apt. #, etc.  
City  
VERO BEACH FL Zip Code  
32962

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)

ADAMS, JAMES R

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

1528 ST. DAVIS

11b. City, State & Zip Code

VERO BEACH FL 32967

11c. Registration/  
Document Number

00002058617--1  
-01/15/97--01024--012  
\*\*\*\*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

JAMES R. ADAMS

DATE

12/30/96

Typed or Printed Name of General Partner Signing Form

JAMES R. ADAMS

Daytime Telephone Number

561-770-5880