

FILE ON OR BEFORE APRIL 8, 1998 TO AVOID
REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1998



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 APR 27 PM 4: 30



1. Name of Limited Partnership

1a. DOCUMENT #
A31501

AXA ASSOCIATES LIMITED PARTNERSHIP

Mailing Address

Principal Office Address

SUITE 340, 1533 N. WOODWARD AVE.,
BLOOMFIELD HILLS MI 48304

SUITE 340, 1533 N. WOODWARD AVE.,
BLOOMFIELD HILLS MI 48304

3. Date Formed or Registered

04/29/1991

5a. Capital Contributions as
Shown on record.

\$1,000.00

3a. Date of Last Report

11/25/1996

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

4. State or Country of Formation

FL

2. Mailing Address

2a. Principal Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. FEI Number

38-2655567

☐ 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

ARONOFF, ARNOLD Y.
626 GULF SHORE BLVD., SOUTH
NAPLES FL 33940

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

4/24/98

**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)

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

11b. City, State & Zip Code

11c. Registration/
Document Number

AYA, INC.

1533 N WOODWARD, #340

BLOOMFIELD HILLS MI 4

P38874

REINSTATEMENT 1998

700002496427--5

MK 4/27/98

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 4-21, 1998

Typed or Printed Name of General Partner Signing Form

Arnold Y. Aronoff, President

Daytime Telephone Number 248-642-0190

CR2E003 (12/97)



THE UNITED STATES
CORPORATION
COMPANY

A31501

ACCOUNT NO. : 072100000032

REFERENCE : 790887 9725B

AUTHORIZATION : *Patricia Pujot*

COST LIMIT : \$ 641.25

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 APR 27 PM 4:30

ORDER DATE : April 22, 1998

ORDER TIME : 11:08 AM

ORDER NO. : 790887-025

CUSTOMER NO: 9725B

CUSTOMER: Ms. Carla Campbell
Roetzel & Andress
Trainon Centre, Third Floor
850 Park Shore Drive
Naples, FL 34103

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 APR 25 AM 7:57

DOMESTIC FILINGS

NAME: AXA ASSOCIATES LIMITED
PARTNERSHIP

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Andrew Cumper

EXAMINER'S INITIALS

nk
4/27/98
DIVISION OF CORPORATIONS
APR 27 1998

RESUBMIT
Please give original
submission date as file date.