

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

CERTIFIED MAIL # 2-284-482-509

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

98 MAY -7 AM 11:44

1. Name of Limited Partnership

1a. DOCUMENT #
A31628

ORLANDO PREDATORS, LIMITED PARTNERSHIP



Mailing Address

Principal Office Address

P.O. BOX 1100
WINDERMERE FL 34786-1100
US

~~20 N. ORANGE AVE.~~
~~ORLANDO FL 32801~~
~~US~~

3. Date Formed or Registered

06/04/1991

5a. Capital Contributions as
Shown on record.

\$300,010.00

3a. Date of Last Report

01/07/1997

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

- 0 -

2. Mailing Address

2a. Principal Office Address

603 Main Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Windermere, FL

Zip

Country

Zip

Country

34786

USA

6. FEI Number

59-3060456

☐ 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

~~HARRIS, MARSHALL S.~~
~~SUITE 850, 235 S. ORANGE AVE.~~
~~ORLANDO FL 32801~~

10. If changed, new Registered Agent/Office

Name
KEVIN BARKMAN
Street Address (P.O. Box Number Is Not Acceptable)
603 Main Street

Suite, Apt. #, etc.

City
Windermere

FL Zip Code
34786

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)

Kevin Barkman

DATE *3-26-98*

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

FIFTY SPORTS, INC.

603 MAIN ST.

WINDERMERE FL

V50877

PRO-VISION, INC.

~~3736 S. LAKE ORLANDO~~

~~ORLANDO FL~~

~~L29121~~

*amendment filed
5-7-98*

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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 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

Fifty Sports, Inc.
BY: *James English*

DATE *3-30-98*

Typed or Printed Name of General Partner Signing Form

James English, President

Daytime Telephone Number

(407) 876 2200

CR2E003 (12/97)