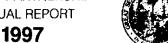
## FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra Mortham

Secretary of State
DIVISION OF CORPORATIONS



96 DEC -6 PM 4:28

SECRETARY OF STATE TALLAHASSEE, FLORIDA



1. Name of Limited Partnership

a. DOCUMENT # **A31931** 

## THE FERRIN FAMILY LIMITED PARTNERSHIP 3. Date Formed or Registered Capital Contributions as Shown on record. Principal Office Address Mailing Address 08/30/1991 3426 ROOSEVELT BLVD. 3426 ROOSEVELT BLVD. \$100,000.00 KEY WEST FL 33040 KEY WEST FL 33040 3a. Date of Last Report 12/12/1995 **5b.** Amount of Capital Contributions in FLORIDA to date: 4. State or Country of Formation 2. Mailing Address 2a. Principal Office Address FL Suite, Apt. #, etc. 6. FEI Number Suite, Apt. #, etc. Applied For 65-0296384 Not Applicable City & State City & State \$8.75 Additional Fee Required 7. Certificate of Status Desired Zip Country Country 8. Make check payable to: Dept. of State (See reverse side for fee information 10. If changed, new Registered Agent/Office 9. Name and Address of Current Registered Agent Name FERRIN, MARIA C Street Address (P.O. Box Number Is Not Acceptable) 3426 N. ROOSEVELT BLVD. KEY WEST FL 33040 Suite, Apt. #, etc City 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. DATE 125-55 SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. Registration/ 11a. (Do NOT Use Post Office Box Numbers) 11b. 11c. 11. City, State & Zip Code Name(s) of General Partner(s) Document Number S70841 FRN, INC. 3426 ROOSEVELT BLVD. KEY WEST FL 300002025663--9 -12/11/96--01026--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.

CR2E003 (6/96)

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. Plorida Statutes

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Typed or Printed Name of General Partner Signing Form ...

MARIA C FORRIN

Daytime Telephone Number 305 294844/