


FILE ON OR BEFORE APRIL 7, 1999 TO AVOID
REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
1. Name of Limited Partnership POMEROY ASSOCIATES, LTD.		1a. DOCUMENT # A32229	
Mailing Address 1535 SOUTHBAY DRIVE OSPREY FL 34229		Principal Office Address 1535 SOUTHBAY DRIVE OSPREY FL 34229	
2. Mailing Address		2a. Principal Office Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip Country		Zip Country	
3. Date Formed or Registered 11/14/1991		5a. Capital Contributions as Shown on record \$405,000.00	
3a. Date of Last Report 12/12/1997		5b. Amount of Capital Contributions in FL ORIDA to date	
4. State or Country of Formation FL		6. FEI Number 65-0292349	
7. Certificate of Status Desired		<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable	
8. Make check payable to Dept. of State (See reverse side for fee information)		<input type="checkbox"/> \$8.75 Additional Fee Required	
9. Name and Address of Current Registered Agent POMEROY, LAWRENCE H., JR. 1535 SOUTHBAY DRIVE OSPREY FL 34229		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	
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)	
POMEROY, LAWRENCE H., JR.		1535 SOUTHBAY DRIVE	
POMEROY, VIRGINIA R.		1535 SOUTHBAY DRIVE	
		11b. City, State & Zip Code	
		OSPREY FL	
		OSPREY FL	
		11c. Registration/Document Number	
		9000002793589--0	
		-03/03/99-01062--006	
		****526.28 ****526.25	
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 <i>Lawrence H. Pomeroiy Jr.</i>		DATE <i>2/18/99</i>	
Typed or Printed Name of General Partner Signing Form <i>LAWRENCE H. POMEROY JR.</i>		Daytime Telephone Number <i>941/966-3831</i>	

FILED
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