

FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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FILED

97 OCT 16 PM 2:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name of Limited Partnership

1a. DOCUMENT #
A32494

ANDLINGER PROPERTIES CAPITAL L.P., LIMITED PARTNERSHIP

98-ACM

Mailing Address

3055 CARDINAL DRIVE
SUITE 304
VERO BEACH FL 32963

Principal Office Address

3055 CARDINAL DRIVE
SUITE 304
VERO BEACH FL 32963

2. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

2a. Principal Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

3. Date Formed or Registered

01/23/1992

3a. Date of Last Report

10/30/1996

4. State or Country of Formation

DE

5a. Capital Contributions as Shown on record.

\$2,367,493.00

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

\$2,367,493.00

6. FEI Number

65-0320515

☐ 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

MITCHELL, IVAR W
3055 CARDINAL DRIVE, SUITE #304
VERO BEACH FL 32963

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)

ANDLINGER PROPERTIES CAPITAL

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

3055 CARDINAL DRIVE,

11b. City, State & Zip Code

VERO BEACH FL

11c. Registration/Document Number

P34633

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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 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

Ivar W. Mitchell

DATE OCT 13, 1997

Typed or Printed Name of General Partner Signing Form Ivar W. Mitchell, V.P.

Daytime Telephone Number 561-234-4998

CR2E003 (6/97)