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

LIMITED PARTNERSHIP
ANNUAL REPORT
1998



THE MARY LOU SHATTUCK FAMILY LIMITED PARTNERSHIP

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # **A32731** 

FILED

98 FEB -6 ANTH OO

SCORE - FLORIDA

TALLAMAS. - FLORIDA



Mailing Address 4080 CHIPPEWA DR. BOULDER CO 80303	Principal Office Address 81800 OVERSEAS HWY ISLAMORADA FL 33036		3. Date Formed or Registered 03/24/1992 38. Date of Last Report 12/31/1996	5a. Capital Contributions as Shown on record. \$3,360.00  5b. Amount of Capital Contributions in FLORIDA to detail to the contributions in FLORIDA to detail to the contributions in FLORIDA to the contributions as Shown on record.
2. Malling Address Suite, Apt. #, etc.	2a. Principal Office Address 396 Palm Drive Sulte, Apt. #, etc.		4. State or Country of Formation FL 6. FEI Number	Contributions in FLORIDA to date:
City & State	City & State	and the second of the second o	52-2307521  7. Certificate of Status Desired	Applied For Not Applicable
Zip Country	Islamorada, FL Zip Country 33036			\$8.75 Additional Fee Required  State (See reverse side for fee information)
9. Name and Address of Current Registered Agent Name			10. If changed, new Registered Agent/Office	
CLARK, BROOKS A. 81800 OVERSEAS HIGHWAY ISLAMORADA FL 33036	Sireet Add 35 Suite, Apr. City		Zip Code	
Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the lews 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  1/31/98  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 Genera (Do NOT Use Post Office Bo	Partner (x Numbers)	<b>b.</b> City, State & Zip Code	11c. Registration/ Document Number
SHATTUCK, MARY LOU	4080 CHIPPEWA DRIVE		BOULDER CO	
SHATTUCK, JOHN B.	4080 CHIPPEWA DRIVE			4306102 /9801120003 11.25 ****141.25
53	250 88.75	de		
Note: General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner.				

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 Pertner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Fiorida Statutes.