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

LIMITED PARTNERSHIP ANNUAL REPORT 1998



THE HIDEAWAY MARINA LIMITED PARTNERSHIP

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

**DOCUMENT #** A32854

FILED 97 OCT 13 AM 11: 42 SECRETARY OF STATE
TALL AMASSEE, FLORIDA



|  |   | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \              | <i>P</i> .  |   |  |
|--|---|--|---|---|--|
| Mailing Address  | Principal Office Address  |  | 3. Date Formed or Registered                      | <b>58.</b> Capital Contributions as Shown on record.  |  |
| C/O ADAM S. GUNSON, ESQ. ATTN: PIERRE G.   |   |  | 04/17/1992<br>38. Dale of Last Report             | <b>A</b> -00 000 00   |  |
| 6390 INDIANTOWN ROAD. SUITE 30   |   | 599 SOUTH FEDERAL HIGHWAY                          |   | \$792,000.00  |  |
| JUPITER FL 33458   | POMPANO BEACH FL 33062  |  | 12/20/1996  | 5b. Amount of Capital   |  |
|  |   |  | 4. State or Country of Formation                  | 5b. Amount of Capital Contributions in FLORIDA to date:                                       |  |
| 2. Mailing Address   | 2a. Principal Office Address  |  |   | \$792,000.00  |  |
|  |   |  | FL  | 3792,000.00   |  |
| Suite, Apt. #, etc.  | Suite, Apt. #, etc.   |  | 6. FEI Number                                     | Applied For   |  |
| City & State   | City & State  |  | 65-0325163  | Not Applicable  |  |
|  |   |  | 7. Certificate of Status Desired                  | \$8.75 Additional   |  |
| Zip Country  | Z <sub>I</sub> p Country  |  | 8 Maio sheek so golds to Davi                     | Fec Required      Nake check payable to: Dept. of State (See reverse side for fee Information |  |
|  |   |  | O. Make check payable to: Dept.                   | 3) State (See reverse and for ten information   |  |
| Name and Address of Current Registered Agent GUMSON, ADAM S.ESQ.                               |   | 10. If changed, new Registered Agent/Office        |   |   |  |
|  |   | Name   |   |   |  |
|  |   | Streol Address (P.O. Box Number Is Not Acceptable) |   |   |  |
| CHASEWOOD PLAZA-SUITE 30   |   | Ciredinad  |   |   |  |
| 6390 INDIANTOWN ROAD   |   | Sulte, Apt. #, etc.                                |   |   |  |
| JUPITER FL 33458   |   | City   |   | FL Zip Code   |  |
| 10a. Pursuant to the provisions of sections 620.1  | 05.1 and 620 102 Florida Statutes the above no  | med limited parts                                  | parchip group and or registered under the laws of | <del></del>   |  |
| for the purpose of changing its registered of<br>agent. I am familiar with, and accept the ob- | flice or registered agent, or both, in the State of f<br>ligations of section 620,192, Florida Statutes |  | nge was authorized by its general partner(s). I h |   |  |
| SIGNATURE (Registered Agent Accepting Appointm   |   |  | DAT   |   |  |
| A GENERAL PARTNER TH   | 1AT IS A CORPORATION,<br>IUST BE REGISTERED A   | , LIMITED<br>ND ACTIV                              | ) PARTNERSHIP OR OTH<br>VE WITH THIS OFFICE.      | ER BUSINESS ENTITY  |  |
| 11. Name(s) of Genoral Parlner(s)  | 11a. Address of Each Gen  |  | 11b. City, State & Zip Code                       | 11c. Registration/<br>Document Number   |  |
| THE HIDEAWAY MARINA,INC.   | 599 S. FEDERAL HIGHWA   |  | POMPANO BEACH FL                                  | V21204  |  |
| .≠<br>ใ  |   |  | 400002<br>-10/1<br>****                           | 23230648<br>7/9701068001<br>550.00 ****550.00   |  |
| Note: Conord northern MAY  | NOT be changed on this for  | VIII. 011 011                                      | andment much be filed to a                        |   |  |
| Note: General partners MAY   | MOT be cusuided ou fulls tol  | កោ; ងរា ង៣   | enoment must be filed to ci                       | iange a generai partner.  |  |

12, I do hereby certify that the information supplied with this filling 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 Socion 119.07(3)(K) in the exempt from public access. I further certify that I am a General Partner of the limited partnership, receiver or trusted empowered to execute the required by chapter 620, Florida Statutes

PERRE GOUDREOU

y signature shall have the same legal effects as it made under eath. I further certify that I am a General Partner of the limited partnership, receiver or trustee