## FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

**DOCUMENT#** 

FILED 98 OCT 20 PM 4: 30 CECDETARY OF STATE

	A33152			TALLAHAS	SEE, FL	ÓRÍDA	
GORDON FAMILY LIMITED							
Mailing Address	Principal Office Address			3. Date Formed or Registered	5a. Çapita	i Contributions as	٦
9 DOGWOOD ROAD HOLLYWOOD FL 33021	9 DOGWOOD ROAD HOLLYWOOD FL 33021			07/07/1992  3a. Date of Last Report  12/10/1997  5b. Amount of Capital		61,160.00	
2. Mailing Address	2a. Principal Office Address			4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:		
Suite, Apt. #, etc.	Suite, Apt. #, etc.			FL 6. FEI Number 65-0336412	Applied For Not Applicable		-
City & State  Zip Country	City & State  Zip Country			7. Certificate of Status Desired		\$8.75 Additional Fee Required	-
Zip Country			8. Make check payable to: Dept. of	f State (See reverse side for fee information)		>	
9. Name and Address of Current Registered Agent		Name	10. If changed, new Registered Agent/Office				
GLASSER, GENE K. % ABRAMS, ANTON, ROBBINS, RESNICK & SCHNEIDER, P.A., 2021 TYLER ST.,		Name  Street Address (P.O. Box Number Is Not Acceptable)  Suite, Apt. #, etc.					
HOLLYWOOD FL 33022	City			FL Zíp Code			
10a. Pursuant to the provisions of sections 620.1051 at for the purpose of changing its registered office or agent. I am familiar with, and accept the obligation	registered agent, or both, in the State of Flo	ed limited partne rida. Such chang	ership organ ge was auth	ized or registered under the laws of the orized by its general partner(s). I hereby	State of Florid: accept the ap	a, submits this statement pointment of registered	
SIGNATURE (Registered Agent Accepting Appointment)				DATE			
A GENERAL PARTNER THAT MUS	'IS A CORPORATION, IT BE REGISTERED AN	ID ACTIV	PART E WIT	NERSHIP OR OTHE TH THIS OFFICE.	R BUSII	NESS ENTITY	
11. Name(s) of General Partner(s)				City, State & Zip Code	11c.	Registration/ Document Number	_
GORDON, EDWIN G.	9 DOGWOOD RD.		HOLLYWOOD FL				(80/8/ 18/08)
				900002 -10/23 ****2	797-17 48 (58	10' 25'	CB3
N-4- Consultration 1837 NA	he shanged an this fam	m. ar ar		nt must be filed to she	ngo a c	anoral nartner	$\dashv$
Note: General partners MAY NOT  12. I do hereby certify that the information supplied with							$\dashv$
Corporations from any liability of non-compliance with	n Section 119.07(3)(k) in the event that the i	nformation supp	lied is deem	ed exempt from public access. I further	certify that the	information indicated on	

SIGNATURE_	Codem
Typed or Printed Name of G	eneral Partner Signing Form