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

1a. DOCUMENT # **A33160**

FILED Mol28

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SECRETARY OF STATE TALLAHASSEE FLORIDA

| RENEGADE PARTNERS LIMITED PARTNERSHIP | | | | |
|--|--|--|---|---|
| Mailing Address | Principal Office Address | | 3. Date Formed or Registered | 5a. Capital Contributions as |
| 900 CIRCLE 75 PARKWAY. SUITE 750 ATLANTA GA 30339 | 900 CIRCLE 75 PARKWAY. SUITE 750 ATLANTA GA 30339 | | 07/08/1992 3a. Date of Last Report 05/13/1998 | \$0.00 |
| 2. Mailing Address | 2a. Principal Office Address | | 4. State or Country of Formation | Contributions in FLORIDA to date: |
| | | | GA | 9 _ |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | | 6. FEI Number | Applied For |
| City & State | City & State | | 58-1803283 | Not Applicable |
| Zip Country | Zip Country | | 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 R | egistered Agent | | 10. If changed, new Registered | Agent/Office |
| ! | | Name | | |
| THE PRENTICE-HALL CORPORATION SYSTEM, INC. | | Street Address (P.O. Box Number Is Not Acceptable) | | |
| 1201 HAYS STREET, SUITE 105 TALLAHASSEE FL 32301 | Suite, Apt. #, etc. | | | |
| ., | City | | | FL Zip Code |
| 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 (Do NOT Use Post Office Box | Partner 44h | | 11c. Registration/ Document Number |
| RENEGADE MANAGEMENT CORP | 900 CIRCLE 75 PARKWAY | | TLANTA GA 30339 | P39553 88 80 80 80 80 80 80 80 80 80 80 80 80 |
| | | | 100002E -10/29/ ****14 | 36-01032-002 |
| 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 cath, 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 DATE 10/20/98 | | | | |
| Typed or Printed Name of General Partier Signing Form Kog et Shetfield Daytime Telephone Number (770) 983-1949 | | | | |