

**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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 JAN 28 PM 4: 22

1. Name of Limited Partnership

1a. DOCUMENT #
A93000000002

The Curry Family Partnership, Ltd.

Mailing Address

Principal Office Address

3. Date Formed or Registered

12/31/1992

5a. Capital Contributions as
Shown on record.

\$1,056,562.50

3a. Date of Last Report

4/15/1994

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

\$1,056,562.50

4. State or Country of Formation

Florida

2. Mailing Address

2a. Principal Office Address

Suite, Apt. #, etc.
222 Royal Palm Way

Suite, Apt. #, etc.
Same

6. FEI Number

59-3156027

☐ Applied For
☐ Not Applicable

City & State
Palm Beach, FL

City & State

7. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

Zip

Country

USA

Zip

Country

8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent

10. If changed, new Registered Agent/Office

Robert A. Pierce
227 S. Calhoun Street
Tallahassee, Florida 32301

Name

Street Address (P.O. Box Number Is Not Acceptable)

3000003122693--6

Suite, Apt. #, etc.

-02/03/00--01080--001

City

***5131.25 ***5131.25

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)

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

11b. City, State & Zip Code

11c. Registration/
Document Number

Bessemer Trust Company of Florida

222 Royal Palm Way

Palm Beach, FL 33480

018091

PENALTY 3,000.00
AR 2,625.00

532.50

\$ 6,157.50

RENEW STATEMENT 1995-2000

(MK)

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.

Bessemer Trust Company of Florida

SIGNATURE

By: **Frederick H. Sandstrom, Sr. V.P.**

DATE

12/15/99

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number **305/372-5005**