## FILE ON OR BEFORE APRIL 7, 1999 TO AVOID REVOCATION AND \$500 PENALTY FEE

## LIMITED PARTNERSHIP **ANNUAL REPORT** 1999



FLORIDA DEPARTMENT OF STATE **Katherine Harris** 

Secretary of State **DIVISION OF CORPORATIONS** 

**DOCUMENT #** 

FILED 99 FEB 26 AM 10: 20

Correct States and Corr

|   |   | A9300000768  |   | SECIRETARY OF STATE  THE THE TRANSPORT OF THE TRANSPORT O |   |
|---|---|--|---|--|---|
| CSC TAN   | GLEWOOD, LTD.   |  |   |  | 9844 8844 8844 8844 8844 8845 8144 884 884 884 884 884 884 884 884 88 |
| Aalling Address Pr  |   | Principal Office Address   | Principal Office Address  |  | <b>5a.</b> Capital Contributions as Shown on record                   |
| 801 SOUTH COUNTY ROAD<br>PALM BEACH FL 33480                                |   | 801 SOUTH COUNTY ROAD<br>PALM BEACH FL 33480   |   | 07/27/1993<br>3a. Date of Last Report<br>01/02/1998  | \$16,900,000.00  5b. Amount of Capital Contributions in FLORIDA       |
| 2. Mailing Address  |   | 2a. Principal Office Address   |   | 4. State or Country of Formation   | (3,509)   |
|   |   | Suite, Apt. #, etc.  |   |  | Applied For   |
| Zip a state   | Country   | City & State  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  | Registered Agent   | Name  | 10. If changed, new Registered A   | AgenVOffice   |
| CEEBRAID-SIGNAL CORPORATION<br>801 SOUTH COUNTY ROAD<br>PALM BEACH FL 33480 |   |  | Street Address (P.O. Box Number Is Not Acceptable)  Suite, Apt #, etc |  |   |
|   |   |  | City  |  | FL Zip Code   |
| for the purp<br>agent. I an<br>SIGNATURE (Regis                             | pose of changing its registered office or not not make the obligations are the obligations attended to the obligations attended to the obligations attended to the obligation of the obligation | egistered agent, or both, in the State of I<br>of section 620.192, Florida Statutes. | Florida Such change v   | p organized or registered under the laws of the<br>vas authorized by its general partner(s). Hereby<br>DATE<br>PARTNERSHIP OR OTHE<br>WITH THIS OFFICE.  | y accept the appointment of registered                                |
| 11. Name(s) (   | of General Partner(s)   | 11a. Address of Each Gen<br>(Do NOT Use Post Office                                  |   | 1b. City, State & 7ip Code   | 11c. Registration/<br>Document Number                                 |
| CEEBRAIC  | D-SIGNAL CORPORATION  | 801 SOUTH COUNT  | Y ROAD  | PALM BEACH FL 33480  | P92000014772  |
|   |   |  | ļ   | 4000027351140<br>-03/04/8301093007<br>****141.25 ****141.25<br>74  |   |

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 trusted empowered to execute this report as required by chapter 620, Florida Statutes.

|           | بعت  |  |
|-----------|------|--|
| SIGNATURE | by ! |  |

DATE

Daytime Telephone Number