


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 ANSPACH HOLDINGS, LTD.		1a. DOCUMENT # A93000001324	
Mailing Address 4500 RIVERSIDE DRIVE PALM GARDENS FL 33410		Principal Office Address 4500 RIVERSIDE DRIVE PALM GARDENS FL 33410	
2. Mailing Address		2a. Principal Office Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

FILED 1/10/98
99 JAN -5 AM 9:50
TALLAHASSEE, FLORIDA



3. Date Form first or Reg. filed 12/10/1993	5a. Capital Contributions as Shown on record \$219,000.00
3a. Date of Last Report 01/15/1998	5b. Amount of Capital Contributions in FLORIDA to date
4. State or Country of Formation FL	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
6. FEI Number 65-0453225	<input type="checkbox"/> \$8.75 Additional Fee Required
7. Certificate of Status Desired	
8. Make check payable to: Dept. of State (See reverse side for fee information)	

9. Name and Address of Current Registered Agent BEERS, ELAINE K 4500 RIVERSIDE DRIVE PALM BEACH GARDENS FL 33408-- <i>INCORRECT ZIP.</i>	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City Zip Code FL 33410
---	---

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) ANSPACH FIXATION DEVICES, INC.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 4500 RIVERSIDE DRIVE	11b. City, State & Zip Code PALM BEACH GARDENS FL	11c. Registration/Document Number P94000007242
--	--	---	--

00000027002280--2
-02/02/99-01079-019
****526.25 ****526.25

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.

SIGNATURE

Typed or Printed Name of General Partner Signing Form

WE
W. E. ANSPACH, JR.

DATE

Daytime Telephone Number

11-29-98
(561) 627-1080

CR2E003 (8/98)