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	REPORT	A 93C	DEPARTMENT OF S DODDODO DN OF CORPORATIO	145 145	B SECRETAR	LÉD Lý of St Corp or	ATE ATIONS	
DOCUMENT #		A93060601453			99 JAN 28 AM ID: 15			
1. Name of Limited Partr THE CROSSROAI	DS PARTNERSHIP,		•••••					
2. Mailing Address		3. Principal Office Addres				TE IN THIS SP.	ACE	
2. Mailing Address P.O. Box 13633		226 N. Duval Street			To Do Business in Florida	12/3	0/93	
Suite. Apt #, etc		Suite, Apt. #. etc			5. FELNumber		Applied Fo	
City & State Tallahassee,	FL 32317	City & State Tallahassee,	FL		<u>59-2393765</u> 6.	58	75 Additional Fee regu	
Zip 32317	Country KERN USA	^{Zip} 32301	Country USA		CERTIFICATE OF STATUS DES 7. Stale or Country of Formation		or a Certificate of Statu	
 8a. Capital Contribution on Record \$15(8b. Amount of Capital C FLORIDA to date 	0,000.00		er <u>each year due</u> this offi ital Fee(s): \$103-75 for <u>s</u> e(s): \$500 penalty fee fo ired in 8b is greater than	ce ach year due th ir <u>each year rep</u> o	on amount entered in 8b, with a mini is office, beginning with 1992 calend yf form is delinguent d in 8a, a supplemental affidavit must	ar year.		
9.	Name and Address of Curren	Registered Agent	Name		10. If changed, new registered	agent/olfice		
James M. Rudnick 226 N. Duval Street Tallahassee, FL 32301				tress (P.O. Box	Box Number is Not Acceptable)			
			Suite, Apt #, etc					
		Сіїу						
for the purpose of	changing its registered office or	registered agent, or both in the St	ove-named limited parti late of Floridal Such cha	nership organizi ange was author	co or registered under the laws of th rized by its general partner(s). I here	E State of Florid	Zip Code da, submits this statemer appointment of registere	
for the purpose of agent. I am familia SIGNATURE (Registered Ag	changing its registered office or r with and accept the obligation gent Accepting Appointment) PARTNER THAT	registered agent, or both in the Si s of section 620 192, Florida Statu IS A CORPORATI	ove-named limited partilitate of Florida Such chates	PARTN	DATE	by accept the	då, submits this statemet appontment of registere	
for the purpose of agent. I am familia SIGNATURE (Registered Ac A GENERAL	changing its registered office or r with and accept the obligation gent Accepting Appointment) PARTNER THAT MUS	registered agent, or both in the Si s of section 620 192, Florida Statu	ove-named lim ted parti late of Florida Such cha tes ON, LIMITEC D AND ACTI Dengral Pariner	PARTN	DATE	by accept the	då, submits this statemet appontment of registere	
for the purpose of agent. I am familia SIGNATURE (Registered Ag A GENERAL 11. Names of Gene	changing its registered office or r with and accept the obligation gent Accepting Appointment) PARTNER THAT MUS' eral Partner(s)	registered agent, or both in the Si s of section 620 192, Florida Statu IS A CORPORATI T BE REGISTERE Address of Each (ove-named limited parti late of Florida Such cha tes ON, LIMITEC DAND ACTI Jeneral Pariner fice Box Numbers)) PARTN VE WITH	DATE ERSHIP OR OTHEI I THIS OFFICE.	R BUSIN	da, submits this statemen appointment of registere VESS ENTITY Registration	
for the purpose of agent. I am familia SIGNATURE (Registered Ag A GENERAL 11. Names of Gene	changing its registered office or r with and accept the obligation PARTNER THAT MUS eral Partner(s) prises, Inc.	registered agent, or both in the Si s of section 620 192, Florida Statu IS A CORPORATI T BE REGISTERE Address of Each ((Do NOT Use Post Of	ove-named limited parti late of Florida Such cha tes ON, LIMITEC DAND ACTI Dengral Pariner fice Box Numbers) 1 Street) PARTN VE WITH	DATE DATE ERSHIP OR OTHEI I THIS OFFICE. City, State and Zip Code	R BUSIN 11a.	da, submits this statemen appointment of registere NESS ENTITY Registration Document Number 4796	
for the purpose of agent. I am familia SIGNATURE (Registered Ac A GENERAL	changing its registered office or r with and accept the obligation PARTNER THAT MUS eral Partner(s) prises, Inc.	registered agent, or both in the Si s of section 620 192, Florida Statu IS A CORPORATI T BE REGISTERE Address of Each C (Do NOT Use Post Of 226 N. Duva	ove-named limited parti late of Florida Such cha tes ON, LIMITEC DAND ACTI Dengral Pariner fice Box Numbers) 1 Street	PARTN VE WITH Talls	DATE ERSHIP OR OTHE ITHIS OFFICE. City, State and Zip Code ahassee, FL 3230	R BUSIN 11a.	da, submits this statemen appointment of registere NESS ENTITY Registration Document Number 4796	
for the purpose of agent. I am familia SIGNATURE (Registered Ag A GENERAL 11. Names of Gene WT & T Enterp	changing its registered office or r with and accept the obligation PARTNER THAT MUS eral Partner(s) orises, Inc. THIS IS THE	registered agent, or both in the St s of section 620 192, Florida Statu IS A CORPORATI TBE REGISTERE Address of Each C (Do NOT Use Post Of 226 N. Duva 1998 & 1999 ANNU	ove-named limited part late of Florida Such cha les ON, LIMITER D AND ACTI Senaral Pariner fice Box Numbers) 1 Street JAL REPORT	PARTN VE WITH Talla FORM	DATE ERSHIP OR OTHEI ITHIS OFFICE. City. State and Zip Code ahassee, FL 3230 BODOO2 -02/10/ ****10E	R BUSIN 11a. 1 F7 7715 /9901	da. submits this statemer appointment of registere NESS ENTITY Registration Document Number 4796 9782 081003 ***1061.25	
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•	P.O. Box 13633 Tallahassee, FL 32317 (850) 671-1999 FAX (850) 425-1904								
	FAX SHEET		JAN 28 AM						
Date1/28/99	Fax #4	10-1015	AMID: 15						
To Whom It	(including cover) May Concern ATTN: BUCK KOHR of State From	e Culpepper	~						
Subject:									
	This is to notify you that we did not receive our 1998 or 1999 Annual report for The Crossroads Partnership, Ltd. The address on the 1997								
report was t	the wrong address in which the 1998 rep	ort was sent to	•						

If you do not receive all copies of this FAX, please contact us at the telephone number or FAX number below. Thank you.

Our new location is 226 N. Duval Street

MC 1/28/99

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