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

DOCUMENT #

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 OCT -5 PM 3: 45

A940000010	<u>)1 </u>
HIP, LTD.	
Principal Office Address	3. Date Formed or Registered 5a. Capital Contributions as Shown on record.
2270 RANCHETTE LANE PALM HARBOR FL 34683	01/21/1994 3a. Date of Lest Report 09/16/1997 5b. Amount of Cepital Contributions in FLORIDA
2a. Principal Office Address	4. State or Country of Formation to date:
Suite, Apt. #, etc.	6. FEI Number ☐ Applied For 59-32 19628 ☐ Not Applicable
	7. Certificate of Status Desired \$8.75 Additional
Zip Cour	8. Make check payable to: Dept. of State (See reverse side for fee information)
Str Su Cit D51 and 620.192, Florida Statutes, the above-named limit oe or registered agent, or both, in the State of Florida. Su gations of section 620.192, Florida Statutes.	Ited partnership organized or registered under the laws of the State of Florida, submits this atterment such change was authorized by its general partner(s). I hereby accept the appointment of registered DATE DATE ACTIVE WITH THIS OFFICE.
	PALM HARBOR FL 34683
2270 RANCHETTE LANE 2270 RANCHETTE LANE	PALM HARBOR FL 34683 1 0 0 0 2 6 5 3 0 3 1 - + 0 -10/07/93 01/097002 *****526.25
	Principal Office Address 2270 RANCHETTE LANE PALM HARBOR FL 34693 2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Cou urrent Registered Agent N S S C L L L L L L L L L L L L

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 .