FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS FLORIDA DEPARTMENT OF STATE LIMITED PARTNERSHIP Sandra B. Mortham ANNUAL REPORT Secretary of State 1999 **DIVISION OF CORPORATIONS** 98 DEC 22 AM 9: 20 a. DOCUMENT # **A94000000576** 1. Name of Limited Partnership ZANIOL FAMILY LIMITED PARTNERSHIP Mailing Address 3. Date Formed or Registered 5a. Capital Contributions as Shown on record. Principal Office Address 04/20/1994 7301 6TH AVENUE N 7301 6TH AVENUE N \$7,000.00 ST PETERSBURG FL 33710 ST PETERSBURG FL 33710 3a. Date of Last Report 11/24/1997 **5b.** Amount of Capital Contributions in FLORIDA to date: 4. State or Country of Formation 2. Mailing Address 2a. Principal Office Address Suite, Apt. #, etc. Suite, Apt. #, etc. 6. FEI Number Applied For Not Applicable 59-3236723 City & State City & State 7. Certificate of Status Desired \$8.75 Additional Fee Required Country 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 Name ZANIOL, DAVID Street Address (P.O. Box Number Is Not Acceptable) 7301 6TH AVENUE N ST PETERSBURG FL 33710 Suite, Apt. #, etc. Zip Code 10a. Pursuant to the provisions of sections 620.1051 and 620.105, Horida 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 regis agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT'IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. Address of Each General Partner Registration/ Document Number 11. Name(s) of General Partner(s) 11a. (Do NOT Use Post Office Box Numbers) 11b. City, State & Zip Code 11c. ZANIOL, DAVID 7301 6TH AVE., N. ST PETERSBURG FL 3371 ZANIOL, KIMBERLE! 7301 6TH AVE., N. ST PETERSBURG FL 3371 --200002735992--201015--021

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

1 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 charge 620, Florida Statutes.

SIGNATURE Typed or Printed Name of Gene

DAVID B. ZANIOL

Daytime Telephone Number,

DATE 2-14-98

****141.25 ****141.25

DAIE ROY 7-0

CR2E003 (8/98)