FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1. Name of Limited Partnership

DOCUMENT # 1a.

FILED 97 APR 21 AM 9: 51 SECRETARY OF STATE.
TALLAHASSEE, FLORIDA

	A9400000589	49400000589 97-AR CM					
BRENNAN, LTD.	97-						
Mailing Address	Principal Office Address	<u> </u>	3. Date Formed or Registered	5a. Capita Shown	Contributions as on record.		
1049 ERROL PARKWAY APOPKA FL 32712 1049 ERROL PARKWAY APOPKA FL 32712			04/22/1994 3a. Date of Last Report 02/09/1996	\$3,000,000.00			
2. Mailing Address	2a. Principal Office Address	2a. Principal Office Address			t of Capital outrons in FLORIDA		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 59-3281344	I	Applied For Not Applicable		
City & State Zip Country	City & State Zip Country	·····-	7. Certificate of Status Desired	Q	\$8.75 Additional Fee Required		
			8. Make check payable to: Dept. of State (See reverse side for fee information)				
9. Name and Address of C	urrent Registered Agent Name		10. If changed, new Registere	ed Agent/Office			
Brennan, William E 1049 Errol Parkway Apopka Fl 32712		Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. 5.001021539551 -04/24/9701093001 City ****576.25					
for the purpose of changing its registered off agent. I am familiar with, and accept the obli	•			eby accept the a			
A GENERAL PARTNER TH	AT IS A CORPORATION, LIMITE UST BE REGISTERED AND AC	D PART	TNERSHIP OR OTHE		NESS ENTITY		
11. Name(s) of General Partner(s)	118. (Do NOT Use Post Office Box Number		City, State & Zip Code	11c.	Registration/ Document Number		
BRENNAN, WILLIAM E	1049 ERROL PARKWAY	AF	POPKA FL 32712				
Noter General partners MAY I	NOT be changed on this form; an a	mendme	ent must be filed to ch	ange a ge	neral partner.		
40 I do harshy and hi that the referention transition	Lighth this filing is yet interly furnished and door not gualify to	r the avenution	n stated in Costian 110 07/2\/k\ Elected	Ctatutos I rolos	ea the Division of		

12.	If do hereby certify that the information supplied with this filling is yountarily furnished and does not qualify for the exemption	stated in Section 119.07(3)(k), Florida Statutes. I release the Division of
	Corply ations from any fiability of non-compliance with Section 19.07(3)(k) in the event that the information supplied is deer	
	this andual report is true and accurate and that my eighbure shall have the same legal effects as if made under oath. I furth	ner certify that I am a General Partner of the limited partnership, receiver or trustee
	empowered to execute this report as required by charger 620, Florida Statute	
	V 6 Colle 571 -	
SIG	ENATURE WM MUIS annu	DATEX 4/10/97
Φ 10		

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