

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

FILED

97 APR 15 AM 10:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**LIMITED PARTNERSHIP
ANNUAL REPORT
1997**



FLORIDA DEPARTMENT OF STATE
Sandra Mortham
Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

SANTA FE VENTURES, LTD.

1a. DOCUMENT #
A94000000762

97-AR
CM



Mailing Address

C/O HUNTCO MANAGEMENT, L.C.
~~ROUTE 4, BOX 652B~~
~~LAKE CITY FL 32055~~

Principal Office Address

C/O HUNTCO MANAGEMENT, L.C.
~~ROUTE 4, BOX 652B~~
~~LAKE CITY FL 32055~~

3. Date Formed or Registered

06/01/1994

5a. Capital Contributions as
Shown on record.

\$26,000.00

3a. Date of Last Report

12/29/1995

5b. Amount of Capital
Contributions in FLORIDA
to date:

26,000.00

4. State or Country of Formation

FL

6. FEI Number
59-3308425

☐ Applied For
☒ Not Applicable

7. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

8. Make check payable to: Dept. of State (See reverse side for fee information)

2. Mailing Address

405 Lake City Ave.

Suite, Apt. #, etc.

2a. Principal Office Address

Same

Suite, Apt. #, etc.

City & State

Lake City FL

City & State

Zip Country
32055 Columbia

9. Name and Address of Current Registered Agent

COLEMAN, C. RANDOLPH
7077 BONNEVAL ROAD
SUITE 310
JACKSONVILLE FL 32216

10. If changed, new Registered Agent/Office

Name

Allen O. Coleman

Street Address (P.O. Box Number is Not Acceptable)

500 ACL Road

Suite, Apt. #, etc.

City

Lake City

FL

Zip Code

32025

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)

Allen O. Coleman

DATE

10/4/96

**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)

HUNTCO MANAGEMENT, L.C.

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

ROUTE 4, BOX 652B

11b. City, State & Zip Code

LAKE CITY FL 32055

11c. Registration/
Document Number

L94000000251

100002151701--5
-04/23/97--01051--010
****320.75 ****320.75

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

Allen O. Coleman

Huntco Management, L.C.
President

DATE

10/4/96

Typed or Printed Name of General Partner Signing Form

Allen O. Coleman

Designated Telephone Number

904 755-5105

CP2E003 (6/96)