

**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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

96 DEC 31 PM 1:58

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1/7

1. Name of Limited Partnership

1a. DOCUMENT #
A94000001648

JZ MORGAN - GULF TRACE, LTD.



Mailing Address
**2430 ESTANCIA BLVD., SUITE 112
CLEARWATER FL 34621**

Principal Office Address
**2430 ESTANCIA BLVD., SUITE 112
CLEARWATER FL 34621**

3. Date Formed or Registered
12/06/1994

5a. Capital Contributions as
Shown on record.
\$4,000.00

3a. Date of Last Report
01/03/1996

5b. Amount of Capital
Contributions in FLORIDA
to date:
\$ 4,000

2. Mailing Address
P.O. Box 159

Suite, Apt. #, etc.

City & State
Imperial Springs FL

Zip
34688-0159 Country
Pinellas

2a. Principal Office Address
132 TENTH AVE N.

Suite, Apt. #, etc.
102

City & State
Safety Harbor FL

Zip
34695 Country
Pinellas

4. State or Country of Formation
FL

6. FEI Number
59-3282864

☐ 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)

9. Name and Address of Current Registered Agent

**MORGAN, TERRY L.
2430 ESTANCIA BLVD., SUITE 112
CLEARWATER FL 34621**

10. If changed, new Registered Agent/Office

Name
R. John Zawodny
Street Address (P.O. Box Number is Not Acceptable)
132 TENTH AVE N.
Suite, Apt. #, etc.
102
City
Safety Harbor FL Zip Code
34695

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)

DATE **12/30/96**

**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)

JZ MORGAN CAPITAL, INC.

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

**2430 ESTANCIA BLVD.,
132 TENTH AVE N.
102**

11b. City, State & Zip Code

**CLEARWATER FL 34621
Safety Harbor FL
34695**

11c. Registration/
Document Number

P94000088226

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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 690, Florida Statutes.

SIGNATURE

DATE **12/30/96**

Typed or Printed Name of General Partner Signing Form

R. John Zawodny

Daytime Telephone Number **813-938-8886**