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
96 DEC 27 PM 4:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name of Limited Partnership

1a. DOCUMENT # A94000001723

PETERSON PARTNERS, LTD., L.P.

Mailing Address
11 LAKESIDE LANE - UNIT A
NORTH KEY LARGO FL 33037

Principal Office Address
11 LAKESIDE LANE - UNIT A
NORTH KEY LARGO FL 33037

2. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

2a. Principal Office Address
Suite, Apt. #, etc.
City & State
Zip Country

3. Date Formed or Registered
12/12/1994

3a. Date of Last Report
12/19/1995

4. State or Country of Formation
FL

5a. Capital Contributions Actually Received
$3,500,000.00

5b. Amount of Capital Contributions in FLORIDA to date
$ 3,500,000.00

6. FEI Number
65-0516454
☐ 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 schedule)

9. Name and Address of Current Registered Agent
PETERSON, MARJORIE W
11 LAKESIDE LANE - UNIT A
NORTH KEY LARGO FL 33037

10. If Changed, New Registered Agent/Office
Name
Street Address (P.O. Box Number Is Not Acceptable)
Suite, Apt. #, etc.
City FL Zip Code

10a. Pursuant to the provisions of Section 620.102 of the Florida Statutes, the undersigned 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 a general partner(s). I hereby accept the appointment as registered agent. I understand that I will comply with the obligations under Section 620.102, Florida Statutes.

SIGNATURE (Registered Agent Acceptance/Appointment) DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name of General Partner(s)	**11a.** Address of Each General Partner (DO NOT Use Post Office Box Numbers)	**11b.** City, State & Zip Code	**11c.** Foreign Entity Document Number
PETERSON, MARJORIE W	11 LAKESIDE LANE - UN	NORTH KEY LARGO FL 33	

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

12. I hereby certify that the information supplied with this filing, and to the best of my knowledge, believe, and belief, it is true, complete, and accurate. I further certify that the information supplied with this filing complies with the requirements of Section 119.07(5)(b), Florida Statutes, and that the information supplied is the current, and