

FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

**LIMITED PARTNERSHIP
ANNUAL REPORT
1998**



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 DEC 22 AM 9:42

4/2/98
12/31

1. Name of Limited Partnership

1a. DOCUMENT #
A94000001813

VISTA LAKES LIMITED



Mailing Address

15292 SW 17 ST.
DAVIE FL 33326

Principal Office Address

15292 SW 17 ST.
DAVIE FL 33326

3. Date Formed or Registered

12/23/1994

5a. Capital Contributions as Shown on record.

\$441,500.00

3a. Date of Last Report

12/18/1996

5b. Amount of Capital Contributions in FLORIDA to date

4. State or Country of Formation

FL

6. FEI Number

65-0529601

☐ 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

Suite, Apt. #, etc.

City & State

Zip

Country

2a. Principal Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

9. Name and Address of Current Registered Agent

ROBBINS, CHARLES D ESQ
777 BRICKELL AVE.
900 SUB BANK BLDG.
MIAMI FL 33131

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 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

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)

DAVENPORT, RICHARD A
VISTA DEVELOPMENT, INC.

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

15292 SW 17 St.
11934 SW 208 TERRACE
5901 SW 82 St
9130 SW 78 CT

11b. City, State & Zip Code

Davie FL 33326
MIAMI FL 33177
South Miami FL 33143
MIAMI FL 33156

11c. Registration/Document Number

P94000079745

100002391831--0
-01/06/98--01108--014
****550.00 ****550.00

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

DATE

Typed or Printed Name of General Partner Signing Form: **Richard A. Davenport** Daytime Telephone Number: **954-382-0000**

CR2E003 (6/97)