

FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1999



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 DEC 17 AM 11:14

1. Name of Limited Partnership

1a. DOCUMENT #
A95000000030

EXCEL BUILDING, LTD.



CD 12/23

Mailing Address

Principal Office Address

3202 SAWGRASS VILLAGE CIRCLE
PONTE VEDRA BEACH FL 32082

3202 SAWGRASS VILLAGE CIRCLE
PONTE VEDRA BEACH FL 32082

3. Date Formed or Registered

01/06/1995

3a. Date of Last Report

12/04/1997

4. State or Country of Formation

FL

5a. Capital Contributions as
Shown on record.

\$300,228.00

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

2. Mailing Address

2a. Principal Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. FEI Number

59-3285690

☐ 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

F&L CORP.
200 NORTH LAURA STREET
JACKSONVILLE FL 32202

10. If changed, new Registered Agent/Office

Name
BARON BARTLETT
Street Address (P.O. Box Number is Not Acceptable)
50 HIGHWAY A1A #103
Suite, Apt. #, etc.
City
PONTE VEDRA BEACH
Zip Code
FL 32082

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 12/15/98

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)

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

11b. City, State & Zip Code

11c. Registration/
Document Number

FIRST COAST DEVELOPMENT GROU

3202 SAWGRASS VILLAGE

PONTE VEDRA BEACH FL

P94000080516

100002723101--7
-12/28/98--01060--022
****526.25 ****526.25

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.

Bryan J. Lendry, President of
FIRST COAST DEVELOPMENT GROUP, INC.
General Partner

SIGNATURE

DATE 12/8/98

(Bryan Lendry is not a general partner)

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number (904) 285-8986

CR2E003 (8/98)