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 15 PM 1: 23

1. Name of Limited Partnership	1a. DOCUMENT# A9500000113						
TAMARAC S.C. COMPANY, LTD.							
Mailing Address 1733 W. FLETCHER AVE. TAMPA FL 33512	Principal Office Address 1733 W. FLETCHER AVE. TAMPA FL 33612		3. Date Formed or Registered 01/20/1995 3a. Date of Last Report	5a. Capital Contributions as Shown on record.			
2. Mailing Address 21301 Powerline Road, #312 Suite, Apt. #, etc. Boca Raton, FL 33433	2a. Principal Office Address 21301 Powerline Road, #312 Suite, Apt. #, etc. Boca Raton, FL 33433		12/18/1997 4. State or Country of Formation FL 6, FEI Number 59-3290020	5b. Amount of Capital Contributions in FLORIDA to date: Applied For Not Applicable			
City & State Zip Country	City & State Zip Country		7. Certificate of Status Desired 8. Make check payable to: Dept. of St	\$8.75 Additional Fee Required			
CLIFFORD L. WALTERS 802 11TH STREET WEST BRADENTON FL 34205 10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limf for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Stagent, I am familiar with, and accept the obligations of section 620.192, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIM			. Such change was authorized by its general partner(s), I hereby accept the appointment of registered DATE				
11. Name(s) of General Partner(s) TAMARAC CORPORATE, INC.	Address of Each General P 11a. (DO NOT Use Post Office Box) 1793-W. FLETCHER AVEN 2 13 01 Powerlives Surfe 3/2	Numbers) 11b.	City, State & Zip Code MPA-FL SS612 CG. Recton #133433	11c. Registration/ P95000005194 Registration/ P95000005194 Registration/ Registratio			
Note: General partners MAY NOT	e changed on this form:	an amendme	ent must be filed to char	nge 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	elease the	e Division of	ſ
	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 the	at the info	rmation indic	ated on
	this annual report is true and accurate and that my signature shall have the same legal effects as if made under eath. I further certify that I am a General Partner of the limited	partnerst	nip, receiver	or trustee
	empowered to execute this report as required by chapter 620, Florida Statuses.	1	_	

SIGNATURE

Typed or Printed Name of General Partner Signing Form