

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

1. Name of Limited Partnership

1a. DOCUMENT #
A95000000286

WILDERNESS VENTURES, LTD.

Mailing Address

5290
5050 HIATUS ROAD
SUNRISE FL 33351

Principal Office Address

5290
5050 HIATUS ROAD
SUNRISE FL 33351

2. Mailing Address

5290 HIATUS RD
Suite, Apt. #, etc

City & State

Zip Country

2a. Principal Office Address

5290 HIATUS RD.
Suite, Apt. #, etc

City & State

Zip Country

3. Date Formed or Registered

03/01/1995

3a. Date of Last Report

01/05/1998

4. State or Country of Formation

FL

6. FET Number

65-0561458

7. Certificate of Status Desired

5a. Capital Contributions as

Shown on record
\$3,000,000.00
\$5,000,000.00

5b. Amount of Capital
Contributions in FL ORIDA
to date

☐ Applied For
☐ Not Applicable

☐ \$8.75 Additional
Fee Required

8. Make check payable to Dept. of State (See reverse side for information)

9. Name and Address of Current Registered Agent

DAVIS, JAMES R
5050 HIATUS ROAD
SUNRISE FL 33351

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)

WILDERNESS GOLF & COUNTRY CL

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

5290
5050 HIATUS ROAD

11b. City, State & Zip Code

SUNRISE FL 33351

11c. Registration
Document Number

P94000069254

3000002762243-17
-02/02/98--01078--017
****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.

SIGNATURE

James R. Davis

JAMES R. DAVIS

DATE

12/30/98

Typed or Printed Name of General Partner Signing Form

Office Telephone Number

954-571 2811

CR25002 (9/98)