FILE ON OR BEFORE APRIL 8,1998 TO AVOID 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
98 FEB -9 PM 1:19

1. Name of Limited Partnership

DEARDOFF LIMITED

1a. DOCUMENT # **A95000000342**

Mailing Address	Principal Office Address
1850 EAST MERRITT ISLAND CAUSEWAY MERRITT ISLAND FL 32752	1850 EAST MERRITT ISLAND CAUSEWAY MERRITT ISLAND FL 32752

3. Date Formed or Registered: 03/07/1995

3a. Date of Last Report: 10/07/1996

4. State or Country of Formation: FL

5a. Capital Contributions as Shown on record: $389,000.00

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

000002430510--4
-02/13/98--01105--004
****535.00 ****535.00

6. FEI Number: 59-3347927
☐ 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	**2a.** Principal Office Address
509 East NASA Blvd.	509 East NASA Blvd.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Melbourne, FL	City & State: Melbourne, FL
Zip: 32901 Country: US	Zip: 32901 Country: US

9. Name and Address of Current Registered Agent	**10.** If changed, new Registered Agent/Office
DEARDOFF, R. BRUCE 1850 EAST MERRITT ISLAND CAUSEWAY MERRITT ISLAND FL 32752	Name Street Address (P.O. Box Number Is Not Acceptable): 509 East NASA Boulevard Suite, Apt. #, etc. City: Melbourne FL Zip Code: 32901

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)	**11a.** Address of Each General Partner (Do NOT Use Post Office Box Numbers)	**11b.** City, State & Zip Code	**11c.** Registration/ Document Number
DEARDOFF, R. BRUCE	~~1850 EAST MERRITT ISL~~ 509 E. NASA Blvd.	~~MERRITT ISLAND FL 327~~ Melbourne FL 32901	
DEARDOFF, SANDRA M	~~1850 EAST MERRITT ISL~~ 509 E. NASA Blvd.	~~MERRITT ISLAND FL 327~~ Melbourne FL 32901	

437.50 8.75 8.75 dcc

CR2E003 (12/97)

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 R. B. Deardoff DATE 2-3-98

407-956-0600