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



FLORIDA DEPARTMENT OF STATE

ANNUAL REPORT 1999	Secreta	CORPORATIONS	17 17 17	n; t; 7	
1. Name of Limited Partnership	1a. DOCUMENT # A9500000746		59		
OVER-THE-ROAD ADVERTISI	NG, LTD.				
Illing Address Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record		
14155 U.S. HIGHWAY ONE, STE. 304 JUNO BEACH FL 33408	14155 U.S. HIGHWAY ONE. STE 304 JUNO BEACH FL 33408		05/12/1995 3 a . trate of Last Report 12/18/1997	\$10-00 5b. Amount of Capita' Contributions to Facility A	
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	to date	
Suite, Apt #, etc	Suite, Apt #, etc		FL 6. FEE Number 65-0579539	☐ Applied For ☐ Not Applicable	
City & State	City & State Zip Country		7. Certificate of Status Desired	\$8.75 Addm.ea	
Zip Country			8 , Make check payable to Dept of	Fee Required 8. Make therik payable to Dept of State (See reverse side for fee information)	
9. Name and Address of Curre	ent Registered Agent	J	10. If changed new Registere	d Agent'Office	
THOMAS, THOMAS J 14155 U.S. HIGHWAY ONE, SUITE 304 JUNO BEACH FL 33408		Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, et City Zip Code			
10a. Pursuant to the provisions of sections 620 1051 for the purpose of changing its registered office of agent it am familiar with, and accept the obligator SIGNATURE (Registered Agent Accepting Appointment). A GENERAL PARTNER THA	or registered agent, or both, in the State of Fi ons of section 620 197, Fiorida Statutes	orda. Such change w	ras authorized by its general portion(s). Theref CIATE	y all cept the appointment of registered	
MU	ST BE REGISTERED A	ND ACTIVE	WITH THIS OFFICE.	l Green and an	
11. Name(s) of General Partner(s)	11a. (Do NOT Use Post Office	Box Numbers]	1b. City, State 8 Zip Code	11c. Registration. Document Number	
OVER-THE-ROAD ADVERTISING, I	14155 U.S. HWY. ONE,		JUNO BEACH FL 33408	P9400059386	
				4 1. 25 ****141.25	

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 retriave the Ovision of Corporations from any liability of non-compliance with Section 119.07(3;k) in the event that the information supplied is decreased exempt from public arcsess. 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 trusted. empowered to execute this report as required by chapter 620, Florida Statutes

SIGNATURE CHAMUS (DIWMES)
THOMAS MANNE CAE FARY + FYEC, VILE PACSIDENT OF OVER THE - ROAD AVERTISING TO TYPED OUT OF OUTPOST SUBMITTED OUTPOST SUBMITTED OUTPOST SUBMITTED OUTPOST SUBMITTED