FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND $500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1997

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 SEP 30 AM 9:58

1. Name of Limited Partnership
MYERS WORLDWIDE INVESTMENTS, LIMITED

1a DOCUMENT # A95000001167

Mailing Address
P.O. BOX 299
JACKSONVILLE FL 32202

Principal Office Address
225 WATER STREET, SUITE 2175
JACKSONVILLE FL 32202

3. Date Formed or Registered 08/02/1995

3a 01/03/1996

4. State or Country of Formation FL

5a. Capital Contributions as Shown on record $7,100,000.00

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

2. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

2a. Principal Office Address
Suite, Apt. #, etc.
City & State
Zip Country

6. 59-3331379 ☐ 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
GIEEBEIG, LEAH B
225 WATER STREET, SUITE 2175
JACKSONVILLE FL 32202

10. If changed, new Registered Agent/Office
Name
Street Address (P.O. Box Number Is Not Acceptable)
Suite, Apt. #, etc
City FL Zip Code

900001965269
-10/04/96--01066--016
****576.25 ****576.25

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
MYERS INVESTMENTS OF JACKSON	P.O. BOX 299	JACKSONVILLE FL 32201	P95000048595

QL 10-3

CR2E003 (6/96)

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 Leah B. Giebeig Treasurer DATE 9-27-96

Typed or Printed Name of General Partner Signing Form Leah B. Giebeig

Daytime Telephone Number 904-354-2359