LIMITED PARTNERSHIP ANNUAL REPORT · 1998	FLORIDA DEPARTMENT OF STATE **Sandra B. Mortham** Secretary of State DIVISION OF CORPORATIONS

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name of Limited Partnership

1a. DOCUMENT #
A95000001202

GAEDEKE LANDERS, LTD.

98-AR/cws
CM

Mailing Address	Principal Office Address	**3.** Date Formed or Registered 08/10/1995	**5a.** Capital Contributions as Shown on record.
3710 RAWLINS STREET SUITE 1000 DALLAS TX 75219	3710 RAWLINS STREET SUITE 1000 DALLAS TX 75219	**3a.** Date of Last Report 12/02/1996	$2,000.00
		4. State or Country of Formation FL	**5b.** Amount of Capital Contributions in FLORIDA to date:

2. Malling Address	**2a.** Principal Office Address	**6.** FEI Number 65-0402466	☐ Applied For ☐ Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	**7.** Certificate of Status Desired ☒	$8.75 Additional Fee Required
City & State	City & State	**8.** Make check payable to: Dept. of State (See reverse side for fee information)	
Zip Country	Zip Country		

9. Name and Address of Current Registered Agent	**10.** If changed, new Registered Agent/Office
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	Name
	Street Address (P.O. Box Number Is Not Acceptable) **500002331665---1**
	Suite, Apt. #, etc. **-10/28/97--01064--008**
	City ****165.00 ****165.00 **FL**

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
GAEDEKE LANDERS MANAGEMENT,	~~4131 N. CENTRAL EXPRE~~ 3710 RAWLINS, SUITE 1000	DALLAS TX ~~75204~~ 75219	F95000003865

CR2E003 (6/97)

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 _Ed Marsh, Pres. Gaedeke Landers Mgmt. Inc, Genl Ptnr._ 9/22/97

Typed or Printed Name of General Partner Signing Form _D.W. Landers_   Daytime Telephone Number _____