

1201 HAYS STREET  
TALLAHASSEE, FL 32301

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A95000001238



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DIVISION OF CORPORATIONS  
95 AUG 17 PM 3:36

ACCOUNT NO. : 072100000032

REFERENCE : 664997 8681A

AUTHORIZATION : *Patricia Pijut*

COST LIMIT : \$ 588.00

ORDER DATE : August 18, 1995

ORDER TIME : 10:33 AM

ORDER NO. : 664997

CUSTOMER NO: 8681A

CUSTOMER: Bernard A. Singer, Esq  
BERNARD A. SINGER, ESQ

Suite B  
4700 Sheridan Street  
Hollywood, FL 33021

300001584039

RECEIVED  
95 AUG 19 PM 12:40  
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DOMESTIC FILING

NAME: J.C. PARTNERSHIP, LTD.

XX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

(TWO COPIES) XX CERTIFIED COPY

CONTACT PERSON: Carina L. Dunlap

EXAMINER'S INITIALS: HL

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*8/18/95*

**CERTIFICATE OF LIMITED PARTNERSHIP  
OF  
J.C. PARTNERSHIP, LTD.,  
a Florida Limited Partnership**

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The undersigned General Partner desiring to form a Limited Partnership pursuant to the Florida Revised Uniform Limited Partnership Law hereby states the following:

1. The name of the Partnership is **J.C. PARTNERSHIP, LTD.**
2. The address of the office of the Partnership is **3101 State Road 7, Hollywood, Florida 33021.**
3. The name and address of the agent for service of process on the Partnership is **Bernard A. Singer, Esquire, 4700 Sheridan Street, Suite B, Hollywood, Florida 33021.**
4. The name and business address of the General Partner is as follows: **J.Carroll Enterprises, Inc., 3101 North State Road 7, Hollywood, Florida 33021.**
5. The mailing address of the Partnership is <sup>M41430</sup> **3101 North State Road 7, Hollywood, Florida 33021.**
6. The latest date upon which the Partnership shall dissolve is **December 31, 2050.**

The execution of this certificate by the undersigned General Partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

**IN WITNESS WHEREOF**, this Certificate of Limited Partnership has been executed by the sole General Partner of J.C. Partnership, Ltd. this 17<sup>th</sup> day of AUGUST, 1995.

**Witnesses:**

Denis Page  
Ann Ruess

**General Partner:**

J. CARROLL ENTERPRISES, INC.

By: James S. Carroll  
James S. Carroll, President

STATE OF FLORIDA     )  
                                  ) SS:  
COUNTY OF BROWARD )

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95 AUG 18 PM 3:31

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS**

BEFORE ME, the undersigned personally appeared JAMES S. CARROLL, President of J. CARROLL ENTERPRISES, INC., a Florida Corporation, which Corporation is the sole General Partner of J.C. PARTNERSHIP, LTD., a Florida Limited Partnership, hereinafter referred to as the "Partnership", who upon being duly sworn, certified as follows:

1. The aggregate amount of capital contributions to the Partnership to be made by the Limited Partners is \$64,000.
2. The aggregate amount of additional capital contributions anticipated to be made by the Limited Partners is \$-0-.

**FURTHER AFFIANT SAYETH NAUGHT.**

Under penalties of perjury I declare that I have read the foregoing and that the facts alleged are true, to the best of my knowledge and belief.

**GENERAL PARTNER:**

**J. CARROLL ENTERPRISES, INC.**

By: \_\_\_\_\_

  
**James S. Carroll, President**

Date: 8/17/95, 1995

STATE OF FLORIDA     )  
                                  ) SS:  
COUNTY OF BROWARD )

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35 AUG 18 PM 3:36

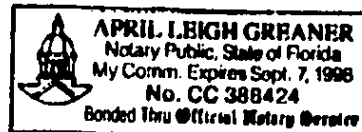
BEFORE ME, the undersigned officer, a Notary Public authorized to administer oaths and to take acknowledgments in and for the State and County set forth above, personally appeared James S. Carroll, President of J. CARROLL ENTERPRISES, INC., a Florida Corporation, who is personally known to me or who has produced as identification and who did not take an oath, who executed the foregoing Affidavit of Capital Contributions, and he acknowledged to me and before me that he executed this Affidavit as President of the General Partner of said Partnership.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this 17th day of AUGUST, 1995.

*April Leigh Greaner*

Name of Notary Public  
State of Florida at Large  
My Commission Expires:  
My Commission Number is:

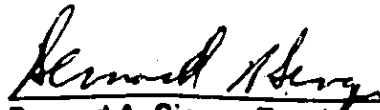
JCP.ACC



**ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT**

Having been named as registered agent for J.C. Partnership, Ltd., a Florida Limited Partnership (the "Partnership") in the foregoing Certificate of Limited Partnership, I, on behalf of the Partnership, hereby agree to accept service of process for said Partnership and to comply with any and all statutes relative to the complete and proper performance of the duties of registered agent.

**REGISTERED AGENT:**

  
Bernard A. Singer, Esquire

JCA.CL.P

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DIVISION OF CORPORATIONS  
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**ON OR BEFORE DECEMBER 31, 1995 ON PARTNERSHIP  
ALL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

**LIMITED PARTNERSHIP  
ANNUAL REPORT  
1996**



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

**FILED**

**95 DEC 29 AM 7:31**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership

**J.C. PARTNERSHIP, LTD.**

1a. DOCUMENT #  
**A95000001238**

2. New Mailing Address, If Applicable

Suite, Apt. #, etc. **2000001683722**  
**-01/10/96--01034--014**  
City, State & Zip **\*\*\*\*576.25 \*\*\*\*576.25**

2a. New Principal Office Address, If Applicable

Suite, Apt. #, etc

City, State & Zip

Mailing Address

**3101 NORTH STATE ROAD 7  
HOLLYWOOD FL 33021**

Principal Office Address

**3101 NORTH STATE ROAD 7  
HOLLYWOOD FL 33021**

If above addresses are incorrect in any way, line through the incorrect information and enter correct address in Block 2 and/or 2a

3. Date Formed or Registered to Do Business in  
FLORIDA **08/18/1985**

3a. Date of Last Report

4. State or Country of Formation  
**FL**

5a. Capital Contributions as Shown  
on Record  
**\$84,000.00**

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

6. FEI Number  
**65-6191735**

Applied For

Not Applicable

7. CERTIFICATE OF STATUS REQUIRED

8. FEES: 1.) Filing Fee: Computed at a rate of \$7 per \$1,000 on amount entered in 5b or 5a if 5b blank, with a minimum filing fee of \$52.50 and a maximum of \$437.50  
2.) Supplemental Fee: \$138.75 (pursuant to section 607.193, F.S.)  
THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$138.75) AND NO MORE THAN \$576.25 (\$437.50 + \$138.75)  
Note: If the amount entered in 5b is greater than amount entered in 5a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.  
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE.

9. Name and Address of Current Registered Agent

**SINGER, BERNARD A COLORE  
4780 SHERIDAN STREET, SUITE B  
HOLLYWOOD FL 33021**

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**

11. Name(s) of General Partner(s)

**J. CARROLL ENTERPRISES, INC.**

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

**3101 NORTH STATE ROAD**

11b. City, State & Zip Code

**HOLLYWOOD FL 33021**

11c. Registration/  
Document Number

**M41430**

**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 S. Carroll*

DATE

**11/30/95**

Typed or Printed Name of General Partner Signing Form

**James S. Carroll**

Telephone Number

**305-981-6505**

CR2E003 (6/95)