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

## LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # A95000001331

## FILED

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## 1. Name of Limited Partnership SECRETARY OF STATE TALLAHASSEE, FLORIDA SEYMOUR INVESTMENTS, LTD. 3. Date Formed or Registered 5a. Capital Contributions as Shown on record. Mailing Address Principal Office Address 09/06/1995 4485 HIGHWAY 17 4485 HIGHWAY 17 \$1,000,000.00 ORANGE PARK FL 32073 ORANGE PARK FL 32073 3a. Date of Last Report Amount of Capital Contributions in FLORIDA to date: 12/24/1997 4. State or Country of Formation 2. Mailing Address 2a. Principal Office Address 1.000,000. Suite, Apt. #, etc. Suite, Apt. #, etc. 6. FEI Number Applied For Not Applicable 59-3339879 City & State City & State 7. Certificate of Status Desired \$8.75 Additional Fee Required Zip Country Country 8 Make check payable to: Dept. of State (See reverse side for fee information) 9. Name and Address of Current Registered Agent If changed, new Registered Agent/Office O'DONNELL-SEYMOUR, LINDA Street Address (P.O. Box Number Is Not Acceptable) 4485 HIGHWAY 17 -01/21/99--01016---024 **ORANGE PARK FL 32073** Suite, Apt. #, etc. City 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)\_ A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) Registration/ 11. Name(s) of General Partner(s) 11b. City, State & Zip Code 11c. Document Number O'DONNELL-SEYMOUR, LINDA 4485 HIGHWAY 17 **ORANGE PARK FL 32073** 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 mapter 620, Florida Statutes. SIGNATURE 3'NONNELL Typed or Printed Name of General Partner Signing Form