

FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT
TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1998



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 DEC 23 PM 12:46

1. Name of Limited Partnership

1a. DOCUMENT #
A95000001356

GRAHAM BLUES, LTD.



Mailing Address

~~802 S. GRAHAM AVE.~~
~~ORLANDO FL 32803~~

Principal Office Address

~~802 S. GRAHAM AVE.~~
~~ORLANDO FL 32803~~

3. Date Formed or Registered

09/13/1995

5a. Capital Contributions as
Shown on record.

\$148,000.00

3a. Date of Last Report

01/02/1997

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

\$33,759.00

4. State or Country of Formation

FL

6. FEI Number

59-3334201

☐ 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)

2. Mailing Address

3514 Haverstick Place

Suite, Apt. #, etc.

2a. Principal Office Address

3514 Haverstick Place

Suite, Apt. #, etc.

City & State

Charlotte, NC

Zip **28226**

Country
USA

City & State

Charlotte, NC

Zip **28226**

Country
USA

9. Name and Address of Current Registered Agent

GRAYSON, LAURA
302 S. GRAHAM AVE.
ORLANDO FL 32803

10. If changed, now Registered Agent/Office

Name

Jennifer Stauffer, C/O DC & Assoc

Street Address (P.O. Box Number Is Not Acceptable)

345 E. State Rd 436

Suite, Apt. #, etc.

Suite 101

City

Fern Park,

FL

Zip Code

32730

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)

Jennifer Stauffer

DATE

12/18/97

**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)

COVENTRY, INC.

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

~~2238 COVENTRY DRIVE~~
3514 Haverstick Pl

11b. City, State & Zip Code

~~WINTER PARK FL 32703~~
Charlotte, NC 28226

11c. Registration/
Document Number

P95000069945

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-01/06/98--01023--005
******340.06 ****340.06**

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

Laura W. Grayson

DATE

12 December 1997

Typed or Printed Name of General Partner Signing Form

Laura W. Grayson, Pres. Coventry, Inc.

Daytime Telephone Number

704-341-8153

CR2E003 (6/97)