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

LIMITED PARTNERSHIP **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State

FII ED

96 DEC 12 PM 3:56

1. Name of Limited Partwership  1a. DOCUMENT # A95000001487  LOVEJOY ROAD WAREHOUSE PROPERTY, LTD.  Multing Address  Principal Once Address  33. Date formed or Registered 335 CHANTARENE DRIVE PENSACOLA FL 32507  2. Mailing Address  3. Date formed or Registered Size Online Mailing Address  3. Date of last Report 10/05/1995  3. Date of last Report 12/27/1995  5. Amount of Capital 6. Applied 6. Applied 6. Applied 6. Amount of Capital 7. Certificate of Status Desired 7. Certificate of Status	1997 DIVISION OF CORPO			SECHLERY OF STATE TALLAHASSEE, FLORIDA				
Maring Address  333 CHANTARENE DRIVE PENSACOLA FL 32507  24. Principal Office Address  25. Mailing Address  26. Principal Office Address  27. Mailing Address  28. Principal Office Address  29. Mailing Address  20. Maili	1. Name of Limited Partnership							
335 CHANTARENE DRIVE PENSACOLA FL 32507  2. Mailing Address  2a. Principal Office Address  2b. Mailing Address  2a. Principal Office Address  5b. Amount of Capital To delite Into the Business of Current Registered Agent  City & State  City & State  City & State  Country  Country  7. Certificate of Status Desired  9. Name and Address of Current Registered Agent  10. If changed, new Registered Agent Office  9. Name and Address of Current Registered Agent  10. If changed, new Registered Agent Not Agent Acceptable)  Street Address (P.D Box Number Is Not Acceptable)  Street Address (P.D Box Number Is Not Acceptable)  10a. Pursuant to the provisions of sections \$20 1051 and \$20.152. Florids Statutes, the above named irrited partnership organized or registered under the taxs of the State of Florids. Such change was authorized by its general partner(s). I hereby accept the agent in the minitar with an accept the obligation of section \$20.152. Florids Statutes.  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  12/2/17/365 - 01.155	OVEJOY ROAD WAREHOU	USE PROPERTY, LTD.			<b>40</b> 00 <b>00</b> 00 <b>00</b> 00 <b>0</b>			
333 CHANTARENE DRIVE PENSACOLA FL 32507  2. Mailling Address  2. Principal Office Address  2. Mailling Address  3. Sulte, Apt. #, etc.  4. State or Country of Formation  FL  3. Make check payable to Dept. of State Search  3. Make check payable to Dept. of State Sec reverse elde for  9. Name and Address of Current Registered Agent  10. If changed, now Registered Agent/Office  9. Name and Address of Current Registered Agent  10. If changed, now Registered Agent/Office  9. Name PROJULACK, LEWIS B SR.  3335 CHANTARENE DRIVE  PENSACOLA FL 32507  10. If changed and Registered Agent/Office Drive State Sec reverse elde for  10. If changed and Registered Agent/Office  10. Street Address (P.D. Box Number Is Not Acceptable)  Suite, Apt. #, etc.  City  10. Street Address (P.D. Box Number Is Not Acceptable)  Suite, Apt. #, etc.  City  10. Street Address (P.D. Box Number Is Not Acceptable)  Suite, Apt. #, etc.  City  10. Street Address (P.D. Box Number Is Not Acceptable)  Suite, Apt. #, etc.  City  10. Street Address (P.D. Box Number Is Not Acceptable)  Suite, Apt. #, etc.  City  10. Street Address (P.D. Box Number Is Not Acceptable)  Suite, Apt. #, etc.  City  10. Street Address (P.D. Box Number Is Not Acceptable)  Suite, Apt. #, etc.  City  10. Street Address of Eactors (P.D. Box Number Is Not Acceptable)  10. Street Address of Eactors (P.D. Box Number Is Not Acceptable)  10. Street Address of Eactors (P.D. Box Number Is Not Acceptable)  10. Street Address of Eactors (P.D. Box Number Is Not Acceptable)  10. Street Address of Eactors (P.D. Box Number Is Not Acceptable)  10. Street Address of Eactors (P.D. Box Number Is Not Acceptable)  10. Street Address of Eactors (P.D. Box Number Is Not Acceptable)  10. Street Address of Eactors (P.D. Box Number Is Not A						J/12/		
PENSACOLA FL 32507  PENSAC	Mailing Address	Principal Office Address			\$725,000.00  5b. Amount of Capital Contributions in FLORIDA			
2. Mailing Address  3. Suite, Apt. #, etc.  5. Suite, Apt. #, etc.  6. FEI Number  5.9.3339842  7. Certificate of Status Desired  7. Certificate of Status Desired  8. Malko check payable to Dept. of State (See reverse side for B. Malko check payable to Dept. of State (See reverse side for B. Malko check payable to Dept. of State (See reverse side for B. Malko check payable to Dept. of State (See reverse side for State (See reverse side for B. Malko check payable to Dept. of State (See reverse side for State (See reverse side for B. Malko check payable to Dept. of State (See reverse side for B. Malko check payable to Dept. of State (See reverse side for State (See reverse side for B. Malko check payable to Dept. of State (See reverse side for State (See reverse side for B. Malko check payable to Dept. of State (See reverse side for State (See reverse side for B. Malko check payable to Dept. of State (See reverse side for B. Malko check payable to Dept. of State (See reverse side for B. Malko check payable to Dept. of State (See reverse side for B. Malko check payable to Dept. of State (See reverse side for B. Malko check payable to Dept. of State (See reverse side for B. Malko check payable to Dept. of State (See reverse side for B. Malko check payable to Dept. of State (See reverse side for B. Malko check payable to Dept. of State (See reverse side for B. Malko check payable to Dept. of State (See reverse side for B. Malko check payable to Dept. of State (See reverse side for B. Malko check payable to Dept. of State (See reverse side for B. Malko check payable to Dept. of State (See reverse side for B. Malko check payable to Dept. of State (See reverse side for B. Malko check payable to Dept. of State (See reverse side for B. Malko check payable to Dept. of State (See reverse side for B. Malko check payable to Dept. of State (See reverse side for B. Malk								
28. Mailing Address  28. Principal Office Address  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  Country  Zip  Country  Zip  Country  Zip  Country  Zip  Country  To, Certificate of Status Desired  R, Make check payable to Dept. of State (See revorse side for B. Make check payable to Dept. of State (See revorse side for B. Make check payable to Dept. of State (See revorse side for S. P. P. P. L. A. K. Street Address (P.O. Bax Number is Not Acceptable)  Street Address (P.O. Bax Number is Not Acceptable)  Suite, Apt. #, etc  City  FL  Zip Code  City  FL  Z		, <u></u>						
City & State  To Country  Country  Country  To Cou	2. Mailing Address	2a. Principal Office Addres	28. Principal Office Address					
City & State  Zip Country  Zip Country  Zip Country  A Make check payable to Dept. of State (See reverse side for the provisions of Sections 620 1051 and 620.192, Florida Statules, the above-named limited partnership organized or registered under the laws of the State of Florida, submits for the purpose of changing its registered agent, or both, in the State of Florida Such change was authorized by its general partner(s). Thereby accept the appointment agent. I am familiar with, and accepting Appointment)  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS MUST BE REGISTERS AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  12. Country  7. Certificate of Status Desired  8. Make check payable to: Dept. of Status Generale State for Feed State of Florida State (See reverse side for Special Agent Acceptable)  Street Address (P.O. Box Number Is Not Acceptable)  FL Zip Code  FL Zip Code  Thereby accept the appointment 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 MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  12. Replications of Sections 620 1051 and						Applied For Not Applicable		
8. Make check payable to Dept. of State (See reverse side for 9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office  POLLACK, LEWIS B SR. 3335 CHANTARENE DRIVE PENSACOLA FL 32507  Street Address (P.O. Box Number Is Not Acceptable)  Street A		City & State				\$8.75 Additional		
POLLACK, LEWIS B SR. 3335 CHANTARENE DRIVE PENSACOLA FL 32507  Suite, Apt. #, etc  City  FL  Zip Code  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 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 MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  11a. (Do NOT Use Post Office Box Numbers)  LBP WAREHOUSE MANAGEMENT, IN  3335 CHANTARENE DRIVE  PENSACOLA FL 32507  P95000075	Zip Country	Zip			of State (See revi	Fee Required erse side for fee Information		
POLLACK, LEWIS B SR. 3335 CHANTARENE DRIVE PENSACOLA FL 32507  Street Address (P.O. Box Number Is Not Acceptable)  Suite, Apt. #. etc  City  FL  Zip Code  To 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 appointmen agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  LBP WAREHOUSE MANAGEMENT, IN  3335 CHANTARENE DRIVE  PENSACOLA FL 32507  P95000075	Q Name and Address of Co	urrent Registered Agent		10. If changed, new Register	ed Agent/Office			
Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, etc  City  FL  Zip Code  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 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 MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  11a. (Co NOT Use Post Office Box Numbers)  LBP WAREHOUSE MANAGEMENT, IN  3335 CHANTARENE DRIVE  PENSACOLA FL 32507  P95000075	· · · · · · · · · · · · · · · · · · ·		Name St		<u>*</u>			
City  FL  Zip Code  TO 3.  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 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 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 MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  11a. (Address of Each General Partner  LBP WAREHOUSE MANAGEMENT, IN  3335 CHANTARENE DRIVE  PENSACOLA FL 32507  P95000075	•		Street Address (P.O. Box Number Is Not Acceptable)					
Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the taws of the State of Florida, submits for the purpose of changing its registered agent, or both, in the State of Florida Such change was authorized by its general partner(s). I hereby accept the appointmen 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 MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  11a. (Do NOT Use Post Office Box Numbers)  LBP WAREHOUSE MANAGEMENT, IN  3335 CHANTARENE DRIVE  PENSACOLA FL 32507  P95000075	PENSACOLA FL 32507		Suite, Apt. #,		etc			
Pursuant to the provisions of sections 620.1051 and 620.1051 and 620.1051, in the Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits 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 agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.  BIGNATURE (Registered Agent Accepting Appointment)  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  11a. (Do NOT Use Post Office Box Numbers)  LBP WAREHOUSE MANAGEMENT, IN  3335 CHANTARENE DRIVE  PENSACOLA FL 32507  P95000075			City Zip Code					
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  11a. (Do NOT Use Post Office Box Numbers)  11b. Chy. State & Zip Code  11c. Regist Document Pensacola FL 32507  P95000075  P95000075	for the purpose of changing its registered offi agent. I am familiar with, and accept the obliq	ice or registered agent, or both, in the State o gations of section 620.192, Florida Statutes.	named limited partne Il Florida Such chan	ige was authorized by its general partner(s). I he	ereby accept the	da, submits this statement appointment of registered		
11. Name(s) of General Partner(s)  118. (po NOT Use Post Office Box Numbers)  11b. City, State & Zip Code  11c. Regist Documer  Pensacola FL 32507  P95000075  P95000075	A GENERAL PARTNER TH	AT IS A CORPORATION	, LIMITED	PARTNERSHIP OR OTHI		NESS ENTITY		
LBP WAREHOUSE MANAGEMENT, IN 3335 CHANTARENE DRIVE PENSACOLA FL 32507 P95000075	<del></del>					Registration/		
700002031597 -12/17/9601155-	Name(s) of General Partner(s)	1 18. (Do NOT Use Post Offi	ce Box Numbers)	11D. City, State & Zip Code	11C.	Document Number		
70002031597 -12/17/9601155- *****576.2 <b>6</b> ******	LBP WAREHOUSE MANAGEMENT, I	.BP WAREHOUSE MANAGEMENT, IN 3335 CHANTARENE		PENSACOLA FL 32507	P95000075958			
70002031597 -12/17/9601155- *****576.2 <b>5</b> *****	4							
				700002 -12/1 ****	700020315977 -12/17/9601155011 *****576.2 <b>5</b> *****576.25			
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general	Note: General partners MAY	NOT be changed on this fo	orm; an ame	endment must be filed to ch	ange a ge	eneral partner		

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.

<b>SIGNATURE</b>	
CICITATIONE	•

Typed or Printed Name of General Partner Signing Form

DATE 179/96

Daytime Telephone Number 904 4571174