

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

98 MAR 26 AM 11:39



1. Name of Limited Partnership

1a. DOCUMENT #
A95000001510

COACHMAN PLAZA CLEANERS, LTD.

Mailing Address

Principal Office Address

C/O J. BOB HUMPHRIES // FOWLER, WHITE
501 EAST KENNEDY BLVD., SUITE 1700
TAMPA FL 33602

14969 N. FLORIDA AVENUE
TAMPA FL 33612

3. Date Formed or Registered

10/09/1995

3a. Date of Last Report

12/13/1996

5a. Capital Contributions as
Shown on record

\$99.00

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

\$99.00

2. Mailing Address

2a. Principal Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. State or Country of Formation

FL

6. FEI Number

59-3338902

☐ 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)

9. Name and Address of Current Registered Agent

10. If changed, new Registered Agent/Office

HUMPHRIES, J. BOB ESQUIRE
C/O FOWLER, WHITE, GILLEN, ET AL
501 EAST KENNEDY BLVD., SUITE 1700
TAMPA FL 33602

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 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

COACHMAN PLAZA CLEANERS, INC

14969 N. FLORIDA AVE.

TAMPA FL 33612

P95000077114

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-04/02/98--01063--001
****141.25 ****141.25
3/26/98

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 228, Florida Statutes.

COACHMAN PLAZA CLEANERS, INC., general partner

SIGNATURE

DATE

3/25/98

Typed or Printed Name of General Partner Signing Form

J. Bob Humphries, Asst. Sec.

Daytime Telephone Number

(813) 222-1173

CR2E003 (6/97)