

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 NOV 13 AM 10:12



1. Name of Limited Partnership

1a. DOCUMENT #
A95000001736

THE FERRELL VENTURE FUND, LTD.

Mailing Address

P.O. BOX 550587
JACKSONVILLE FL 32255

Principal Office Address

P.O. BOX 550587
JACKSONVILLE FL 32255

3. Date Formed or Registered

11/13/1995

5a. Capital Contributions as
Shown on record:

\$2,550,000.00

3a. Date of Last Report

10/03/1996

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

\$2,550,000.00

4. State or Country of Formation

FL

6. FEI Number

59-3346090

☐ 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

Post Office Box 676

Suite, Apt. #, etc.

City & State

Ponte Vedra Beach, FL

Zip

Country

32004

2a. Principal Office Address

217 Ponte Vedra Park Drive

Suite, Apt. #, etc.

City & State

Ponte Vedra Beach, FL

Zip

Country

32082

9. Name and Address of Current Registered Agent

KOEGLER, STEVEN C

WALKER & KOEGLER, P.A.

10151 DEERWOOD PARK BLVD BLDG 100 STE 410

JACKSONVILLE FL 32255

10. If changed, new Registered Agent/Office

Name

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

217 Ponte Vedra Park Drive

Suite, Apt. #, etc.

City

Ponte Vedra Beach

FL

Zip Code
32082

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

SEP 04 1997

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)

FERRELL HOLDINGS, INC.

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

10151 DEERWOOD PK BLV
Building 100, Suite 410

11b. City, State & Zip Code

JACKSONVILLE FL 32255

11c. Registration/
Document Number

F96000002351

300002350993-5
-11/18/97--01087--005
****541.25 ****541.25

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

Ferrell Holdings, Inc. By:

Steven C. Koegler, Secretary

DATE

SEP 04 1997

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

904-996-8800

CR2003 (6/97)