

FILE ON OR BEFORE DECEMBER 31, 1986 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$800 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1986
FLORIDA DEPARTMENT OF STATE
SECRETARY OF STATE
DIVISION OF CORPORATIONS
A95000001761

1. Name of Limited Partnership
Jaffa Road 70 Limited Partnership

1a. DOCUMENT #
A 95 00000 1761

Mailing Address
c/o J. Bob Humphries, Esquire
Fowler, White et al
501 E. Kennedy Blvd., #1700
Tampa, Florida 33602

Principal Office Address
205 N. Marion Street
Tampa, FL 33602

DO NOT WRITE IN THIS SPACE
2. New Mailing Address, if Applicable
Suito, Apt #, etc.
City, State & Zip
700000164861
11/29/95--01063--001
2a. New Principal Office
Suito, Apt #, etc.
City, State & Zip

3. Date Formed or Registered to Do Business in
11/20/86
3a. Date of Last Report
n/a
4. State or Country of Formation
Florida

5a. Capital Contributions as Shown on Record
\$9.90
5b. Amount of Capital Contributions in FLORIDA to date
\$9.90
6. FEI Number
not applicable
Applied For
Not Applicable
7. CERTIFICATE OF STATUS REQUIRED

8. FEES: 1. Filing Fee: Computed at a rate of \$7 per \$1,000 on amount entered in 5b or 5a if 5b blank, with a minimum filing fee of \$52.50 and a maximum of \$437.50
2. Supplemental Fee: \$138.75 (pursuant to section 607.193, F.S.)
THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$138.75) AND NO MORE THAN \$576.25 (\$437.50 + \$138.75)
Note: If the amount entered in 5b is greater than amount entered in 5a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE

9. Name and Address of Current Registered Agent
J. Bob Humphries, Esq.
Fowler, White et al
501 E. Kennedy Blvd., #1700
Tampa, Florida 33602
10. If changed, new Registered Agent/Office
Name
Street Address (P.O. Box Number is Not Acceptable)
Suito, Apt #, etc.
City, State & Zip
FL Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.102, 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 620.102, 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
Jaffa Road (Florida) Management Inc. AFL SOPD	205 N. Marion Street 52.50 138.75 191.25	Tampa, FL N/A BK 11/22/95	P 38822

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.
12. I hereby certify that the information supplied with this filing is accurate, true and correct and it is not due to 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 effect 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.

SIGNATURE _____ DATE 11/17/95
BY: Hugh A. MacArthur, Assistant Secretary (813) 866-8299
Typed or Printed Name of General Partner Signing Form Telephone Number

CR2E003 (6/95)

CORPORATE ACCOUNTS, INC.
1116-D TALLAHASSEE RD.
TALLAHASSEE, FL 32301
(904) 242-2666

Address

City/State/Zip

Phone #

RECEIVED
95 NOV 20 PM 2:23
DIVISION OF CORPORATION

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. JAFFA ROAD 70 Limited Partnership
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in

☐ Mail out

☒ Pick up time 11/20 2:30

☐ Will wait

☐ Photocopy

☒ Certified Copy

☐ Certificate of Status

NEW FILINGS	
☐	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☐	Amendment
☐	Resignation of R.A., Officer/ Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

OTHER FILINGS	
☐	Annual Report
☐	Fictitious Name
☐	Name Reservation

REGISTRATION QUALIFICATION	
☐	Foreign
☒	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

100001645811
-11/27/95--01078--014
****140.00 ****140.00

TAX _____
FILING _____
AGENT FEE 52.50
C. COPY 52.50
TOTAL 105.00
BANK _____
BALANCE DUE _____
REFUND _____

RECEIVED

95 NOV 20 PM 12:21

11/20/95

**CERTIFICATE OF LIMITED PARTNERSHIP
OF**

**Jaffa Road 70 Limited Partnership
a Florida limited partnership**

The undersigned general partner desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Act as set forth in Section 620.106 of the Florida Statutes, hereby states the following:

- (a1) Name of the Limited Partnership:

Jaffa Road 70 Limited Partnership

- (a2) The address of the limited partnership:

205 N. Marion Street
Tampa, Florida 33602

- (b) The name and address of the agent for service of process:

J. Bob Humphries, Esquire
Fowler, White, Gillen, Boggs,
Villareal and Banker, P.A.
501 East Kennedy Boulevard
Suite 1700
Tampa, Florida 33602

- (c) The name and business address of the sole general partner is:

Jaffa Road (Florida) Management Inc.
205 N. Marion Street
Tampa, Florida 33602

- (d) The mailing address for the limited partnership:

c/o J. Bob Humphries, Esquire
Fowler, White, Gillen, Boggs,
Villareal and Banker, P.A.
501 East Kennedy Boulevard, Suite 1700
Tampa, Florida 33602

- (e) The latest date upon which the limited partnership is to dissolve:

midnight, December 31, 2045

- (f) The effective date of this Certificate of Limited Partnership shall be upon the filing with the Secretary of State of the State of Florida.

FILED STATE
SECRETARY OF CORPORATIONS
NOV 20 PM 1:15

- (a) A conveyance or encumbrance of real property held in the Partnership name, and any other instrument affecting title to real property in which the Partnership has an interest shall be effective if executed in the Partnership name solely by a general partner.

The execution of this Certificate by the undersigned general partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed by Hugh A. MacArthur, the Assistant Secretary of Jaffa Road (Florida) Management Inc., the sole general partner of Jaffa Road 70 Limited Partnership, on this 17th day of November, 1985.

General Partner:
JAFFA ROAD (FLORIDA) MANAGEMENT INC.

By: [Signature]
Hugh A. MacArthur, Assistant Secretary

STATE OF FLORIDA

COUNTY OF HILLSBOROUGH

Subscribed and sworn to before me this 17th day of November, 1985, by Hugh A. MacArthur, who is personally known to me and who is the Assistant Secretary of Jaffa Road (Florida) Management Inc., the sole general partner of Jaffa Road 70 Limited Partnership, a Florida Limited Partnership on behalf of the Partnership.

SEAL:

[Signature]
(Signature of person taking acknowledgment)

Victoria Ann Crocker
(Name typed, printed or stamped)

Notary Public
(Notary Public) or (Military Officer's Rank)

Not applicable
Serial Number if Military Officer



VICTORIA ANN CROCKER
My Commission CC424086
Expires Dec 06, 1988
Bonded by AHB
800-862-5878

ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as registered agent for Jaffa Road 70 Limited Partnership, a Florida limited partnership (the "Partnership") in the foregoing Certificate of Limited Partnership, I, J. Bob Humphries, on behalf of the Partnership, hereby agree to accept service of process for said Partnership and to comply with any and all Statutes relative to the complete and proper performance of the duties of registered agent.

REGISTERED AGENT:

J. Bob Humphries

STATE OF FLORIDA

COUNTY OF HILLSBOROUGH

Subscribed and sworn to before me this 17th day of November, 1995, by J. Bob Humphries, who is personally known to me and who executed the foregoing on behalf of the Partnership as Registered Agent.

SEAL:

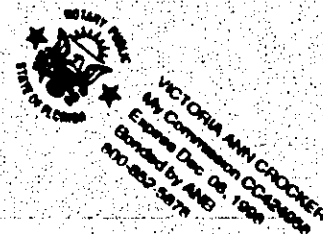
Victoria Ann Crocker
(Signature of person taking acknowledgement)

Victoria Ann Crocker
(Name typed, printed or stamped)

Notary Public
(Notary Public) or (Military Officer's Rank)

Not applicable
Serial Number if Military Officer

JBH/vac/docs/1112



STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

AFFIDAVIT OF CAPITAL CONTRIBUTIONS
of
Jaffa Road 70 Limited Partnership

BEFORE ME, the undersigned, personally appeared Hugh A. MacArthur, Assistant Secretary of Jaffa Road (Florida) Management Inc., general partner of Jaffa Road 70 Limited Partnership, a Florida limited partnership, hereinafter referred to as the "Partnership," who upon being duly sworn, certified as follows:

1. The amount of capital contributions to the Partnership made by the limited partner is as follows:

	Amount	Partnership Interest
Frank Jacobs	\$ 9.90	99.00%
TOTAL:	\$ 9.90	99.00%

2. The amount of additional capital contributions anticipated to be contributed by the limited partner is as follows:

Frank Jacobs	\$ -0-
TOTAL:	\$ -0-

FURTHER AFFIANT SAYETH NAUGHT.

Under penalties of perjury I declare that I have read the foregoing and that the facts alleged are true to the best of my knowledge and belief.

GENERAL PARTNER:
JAFFA ROAD (FLORIDA) MANAGEMENT INC.

By: Hugh A. MacArthur
Hugh A. MacArthur, Assistant Secretary

Subscribed and sworn to before me this 17th day of November, 1996, by Hugh A. MacArthur, who is personally known to me, and who is the Assistant Secretary of Jaffa Road (Florida) Management Inc., the sole general partner of Jaffa Road 70 Limited Partnership.

SEAL:



VICTORIA ANN CROCKER
My Commission CC424886
Expires Dec 06, 1998
Bonded by ANB
BJO-852-5878

Victoria Ann Crocker
(Signature of person taking acknowledgement)

Victoria Ann Crocker
(Name typed, printed or stamped)

Notary Public
(Notary Public) or (Military Officer's Rank)

Not applicable
Serial Number if Military Officer