## FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

## LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # A95000001924

FILLD SECRETARY OF STATE DIVISION OF CORPORATIONS

98 DEC -7 AM 9: 56

813 281 2525

Mailing Address Principal Office Address 97.021 W. LAUREL ST STE 200 5021 W. LAUREL ST., STE 200 5021 W. LAUREL	K2 DEVELOPMENT, LTD.						
5021 W. LAUREL ST STE 200 TAMPA FL 33607-3816  5021 W. LAUREL ST STE 200 TAMPA FL 33607-3816  5021 W. LAUREL ST STE 200 TAMPA FL 33607-3816  5021 W. LAUREL ST STE 200 TAMPA FL 33607-3816  5021 W. LAUREL ST STE 200 TAMPA FL 33607-3816  5021 W. LAUREL ST STE 200 TAMPA FL 33607-3816  5021 W. LAUREL ST STE 200 TAMPA FL 33607-3816  5021 W. LAUREL ST STE 200 TAMPA FL 33607-3816  5021 W. LAUREL ST., STE 200 TAMPA FL 33607-3816  5021 W. LAUREL ST., STE 200 TAMPA FL 33607-3816  5021 W. LAUREL ST., STE 200 TAMPA FL 33607-3816  5021 W. LAUREL ST., STE 200 TAMPA FL 33607-3816  5021 W. LAUREL ST., STE 200 TAMPA FL 33607-3816  5021 W. LAUREL ST., STE 200 TAMPA FL 33607-3816  5021 W. LAUREL ST., STE 200 TAMPA FL 33607-3816  5021 W. LAUREL ST., STE 200 TAMPA FL 33607-3816  5021 W. LAUREL ST., STE 200 TAMPA FL 33607-3816  5021 W. LAUREL ST., STE 200 TAMPA FL 33607-3816  5021 W. LAUREL ST., STE 200 TAMPA FL 33607-3816  5021 W. LAUREL ST., STE 200 TAMPA FL 33607-3816  5021 W. LAUREL ST., STE 200 TAMPA FL 33607-3816  5021 W. LAUREL ST., STE 200 TAMPA FL 33607-3816  5021 W. LAUREL ST., STE 200 TAMPA FL 33607-3816  5021 W. LAUREL ST., STE 200 TAMPA FL 33607-3816	Principal	Principal Office Address		Date Formed or Registered	5a. Capital Contributions as		
2. Mailing Address  2a. Principal Office Address  FL  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  City & State  Country  Zip  Country  Zip  Country  B. Make check payable to: Dept. of State (See reverse side for fee inform  9. Name and Address of Current Registered Agent  Name  KELLY, STEPHEN B  5021 W. LAUREL ST., STE 200  TAMPA FL 33607-3816  Sireet Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, etc.  City  Lip Code  Suite, Apt. #, etc.  City  Lip Code  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 statent 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 epoplitment of registered agent, or both, in the State of Florida, Such change was authorized by its general partner(s). I hereby accept the epoplitment of registered				3a. Date of Last Report 12/03/1997 5b		\$990.00  5b. Amount of Capital Contributions in FLORIDA	
Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  City & State  Country  Country  Country  Country  Country  Country  Country  Country  Country  S. Make check payable to: Dept. of State (See reverse side for fee inform  9. Name and Address of Current Registered Agent  Name  KELLY, STEPHEN B  5021 W. LAUREL ST., STE 200  TAMPA FL 33607-3816  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 appointment of registered  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 appointment of registered.	3 <b>2a.</b> Pri	2a. Principal Office Address			to date:		
City & State  City & State  City & State  City & State  To Country  Country  Country  Country  Country  Country  See Required  8. Make check payable to: Dept. of State (See reverse side for fee inform  9. Name and Address of Current Registered Agent  Name  KELLY, STEPHEN B  5021 W. LAUREL ST., STE 200  TAMPA FL 33607-3816  Suite, Apt. #, etc.  City  FL  Zip Code  Toda. 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 staten 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.	Suite, Ar	Suite, Apt. #, etc.		• =		_	
Zip Country Zip Country  7. Certificate of Status Desired \$8.75 Addition Fee Required  8. Make check payable to: Dept. of State (See reverse side for fee inform  9. Name and Address of Current Registered Agent  Name  KELLY, STEPHEN B  5021 W. LAUREL ST., STE 200  TAMPA FL 33607-3816  Sireet 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 statem 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						Applied For	
2ip Country S. Make check payable to: Dept. of State (See reverse side for fee inform  9. Name and Address of Current Registered Agent  10. If changed, new Registered Agent/Office  KELLY, STEPHEN B  5021 W. LAUREL ST., STE 200  TAMPA FL 33607-3816  Street Address (P.O. Box Number Is Not Acceptable)  Street Address (P.O. Box Number Is Not Acceptable)  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 statem 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 appointment of registers.	City & St	City & State				•••	
9. Name and Address of Current Registered Agent  10. If changed, new Registered Agent/Office  KELLY, STEPHEN B  5021 W. LAUREL ST., STE 200  TAMPA FL 33607-3816  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 statem for the purpose of changing its registered onice 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 registers	Country Zip	Zip Country		Fee Required			
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SIGNATURE (Registered Agent Accepting Appointment)	e of changing its registered office or registered agent miliar with, and accept the obligations of section 620.	, in the State of Florida. Such cha		by its general partner(s), I hereby a			
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTI							
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 & Zlp Code 11c. Registration/ Document Number	General Partner(s) 11a.	ress of Each General Partner  T Use Post Office Box Numbers)	11b.	City, State & Zlp Code	11c.	Registration/ Document Number	
K2 DEVELOPMENT, INC4905-W: LAUREL-ST., S- TAMPA FL 33607 P95000089531	IENT, INC. 499	4905-W. LAUREL ST., S 5021 W Laurel St		TAMPA FL 33607		P95000089531	
Suite 200 0000271062012/11/9801093007 ****14.25 ****141.2	S	Suite 200		0000027 -12/11/ ****14		106202 9801093007 1.25 ****141.25	
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner	al nariners NAV NOT he chan	on this form: an an	nendment n	nust he filed to shan	(G) 2 C	anaral narinar	

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

empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE \_

Typed or Printed Name of General Partner Signing Form

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 he 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

Stephen B. Kelly, President K2 Development, Dayling Telephone Number,