## FILE ON OR BEFORE APRIL 8,1998 TO AVOID REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

Mailing Address

1a. DOCUMENT # A9500002110

Principal Office Address

THE HOWARD J. HENDERSON, JR. FAMILY PARTNERSHIP, LTD.

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

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 APR 13 PM 4: 28

3. Date Formed or Registered



**58.** Capital Contributions as Shown on record.

2. Mailing Address  3. State  3. State  4. State or Country of Formation FL  6. FEI Number 16-1497425  7. Certificate of Status Descred 8. Make check payable to Dept. of State (See reverse 8. Mare and Address of Current Registered Agent  10. If changed, new Registered Agent/Office  8. WILLIAMS PARKER HARRISON DIETZ & GETZEN 200 S. ORANGE AVENUE SARASOTA FL 34238  Street Address (P.O. Box Number is Not Acceptable)  Stille, Apt. #, etc. Chy FL  2. The Country of Formation Street Address (P.O. Box Number is Not Acceptable)  Stille, Apt. #, etc. Chy FL  2. Stille Apt. #, etc. Chy FL  2. Stille Apt. #, etc. Chy FL  3. Street Address (P.O. Box Number is Not Acceptable)  Stille, Apt. #, etc. Chy FL  3. Street Address (P.O. Box Number is Not Acceptable)  Stille, Apt. #, etc. Chy FL  3. Street Address (P.O. Box Number is Not Acceptable)  Stille, Apt. #, etc. Chy FL  3. Apt. #, etc. Chy FL  4. State of Pootes, etc. Chy FL  4. State of Pootes, etc. Chy FL  4. State of Pootes, etc. Chy FL  4. Address (P.O. Box Number is Not Acceptable)  DATE  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINE MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(e) of General Partner(e)  12. Name(e) of General Partner(e)  13. Name(e) of General Partner(e)  14. Address of Exch General Partner(e)  15. Name(e) of General Partner(e)  16. Chy State A ZD Code  17. Name(e) of General	109 SOUTH MAIN STREET	109 SOUTH MAIN STREET		12/29/1995	\$160,000.00		
2. Mailing Address  28. Principal Office Address  28. Principal Office Address  4. State or Country of Formation FL  Suite, Apt. #, etc.  5. FEI Number 16-1497425  7. Certificate of Status Desired  7. Certificate of Status Desired  8. Make check payable to: Dept. of State (See reverse  9. Name and Address of Current Registered Agent  10. If changed, new Registered Agent/Office  JEWELL, SUSAN B  WILLIAMS PARKER HARRISON DIETZ & GETZEN  200 S. ORANGE AVENUE SARASOTA FL 34238  Total Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, etc.  City  City  FL  7  10a. Pursuant to the provisions of sections 620 1051 and 620 192, Florids Statutes, the above-named limited partnership organized or registered under the laws of the state of Florida. Such change was authorized by its general partner(s). I hereby accept the appearance of the propose 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 appearance of the propose 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 appearance of 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 appearance of the purpose of changing its registered Agent. Accepting Appointment)  DATE  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINE MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  118. (Do NOT Use Post Office Box Numbers)  119. City, State a Zip Code  110. City, State a Zip Code  110. City, State a Zip Code  1110. City, State and Code Code Code Code Code Code Code Cod	PITTSFORD NY 14534	PITTSFORD NY 14534		•			
28. Principal Office Address  PL  Suite, Apt. #, etc.  City & State  To Country  Zip  Name and Address of Current Registered Agent  10. If changed, new Registered Agent/Office  Name  Street Address (P.C. Box Number is Not Acceptable)  Suite, Apt. #, etc.  City  FL  Zi  City  FL  Zi					5b. Amount of Capital Contributions in FLORIDA to date:		
City & State  To Country  Country  To Coun	2. Mailing Address 2a. Principal Office Address		GS.	· ·	to date:		
City & State  Zip Country  Zip Country  Zip Country  Zip Country  7. Certificate of Status Desired  8, Make check payable to: Dept. of State (See reviews  9. Name and Address of Current Registered Agent  10. If changed, new Registered Agent/Office  JEWELL, SUSAN B  WILLIAMS PARKER HARRISON DIETZ & GETZEN  200 S. ORANGE AVENUE SARASOTA FL 34236  Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, etc.  City FL  Zi  City FL  Zi  City FL  Zi  City FL  Zi  Agence. I am familiar with, and accept the obligations of section 620.192. Florida Statutes. The State of Florida. Such change was authorized by its general partner(s). I hereby accept the apprace 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 apprace of changing the registered Agent Accepting Appointment).  DATE  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINE MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  12. Name(s) of General Partner(s)  13. Name(s) of General Partner(s)  14. Name(s) of General Partner(s)  15. City State & Zip Code  16. City State & Zip Code  17. Certification of Status Desired Agent Acceptable(s)  18. Name(s) of C	Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		Applied For		
2/p Country  8, Make check payable to Dept. of State (Soe reverse  9, Name and Address of Current Registered Agent  10, If changed, new Registered Agent/Office    Sewell, Susan B   Name	City & State	City & State			Not Applicable		
Name   Name   Name   Name   Name   Street Address (P.O. Box Number is Not Acceptable)	Zip C	untry Zip	Zip Country		1 60 FIBQUIEO		
Name   Name   Name   Name   Name   Street Address (P.O. Box Number is Not Acceptable)	O Nem	and Address of Current Basisland Asset		10 Habanad an Davids	- A (104)		
WILLIAMS PARKER HARRISON DIETZ & GETZEN 200 S. ORANGE AVENUE SARASOTA FL 34236  Suite, Apt. W, etc.  City  FL  7  109. 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, 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 appropriate (Registered Agent Accepting Appointment)  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINE MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(e) of General Partner(s)  119. Address of Each General Partner  119. City, State & Zip Code  110. D  110. D  110. S MAIN STREET  PITTSFORD NY 14532  SIDNATURE (Registered Agent Accepting Appointment)  PITTSFORD NY 14532  SIDNATURE (Registered Agent Accepting Appointment)  110. D  110		and Addison of Contant negligible Agent	Name				
Suite, Apt. #, etc.  City  FL  Z  Total  Tot		DDIOAN DIETT O ACTICN	Street Address (				
SARASOTA FL 34238  City  FL  Z  City  FL  Z  City  FL  Z  Total Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appragent. 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 BUSINE MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  11a. (Do NOT Use Post Office Box Numbers)  11b. City, State & Zip Code  11c. p  HENDERSON, HOWARD J III  109 S MAIN STREET  PITTSFORD NY 14532  FULL ACCEPTANCE OF THE STREET OF THE STREE							
Tips:    City			Suite, Apt. #, etc.				
10g. 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. Such change was authorized by its general partner(s). I hereby accept the appearent. 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 BUSINE MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  11a. Address of Each General Partner (po NOT Use Post Office Box Numbers)  11b. City, State & Zip Code  11c. D  HENDERSON, HOWARD J III  109 S MAIN STREET  PITTSFORD NY 14532  -04/17/330101  ******576; 25 ****	,		City	Zip Code			
11.   Name(s) of General Partner(s)   11a.   Address of Each General Partner   11b.   City. State & Zip Code   11c.   D		RTNER THAT IS A CORPORATION	N, LIMITED PAND ACTIVE	ARTNERSHIP OR OTHE			
HENDERSON, HOWARD J III 109 S MAIN STREET PITTSFORD NY 14532 6000249169 -04/17/380101 *****576. 25 ***	1. Name(s) of General Pe				11c. Registration/		
*****5761.25 *** L				PITTSFORD NY 14532			
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a gene				600002 -04/17 ****\$	491696—1 /38—01014—017 76.25 ****576.25		
2. I do hereby certify that the information supplied with this fiting is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release 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 in	2. I do hereby certify that the	formation supplied with this filing is voluntarily furnished and doe	es not qualify for the exer	mption stated in Section 119.07(3)(k), Florida	Statutes. I release the Division of		

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