LIMITED PARTNERSHIP ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # **A9600000385**

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

97 DEC 15 PM 3: 07

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HOLLER HOCKEY COLORADO), LID.						
Mailing Address	Principal Office Address		3. Date Fo	3. Date Formed or Registered		5a. Capital Contributions as Shown on record	
2295 CORPORATE BLVD., NORTHWEST SUITE 222 BOCA RATON FL 33431	2295 CORPORATE BLVD NORTHWEST SUITE 222 BOCA RATON FL 33431 28. Principal Office Address		3a. Date	02/23/1996 3a. Date of Last Report 12/24/1996 4. State or Country of Formation		\$198,000.00 5b. Amount of Capital Contributions in FLORIDA to date:	
2. Mailing Address							
E. Maining Address	Za. Principal Office Address	Trillipai Office Address			}		
Sulte, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Nur			Applied For	
City & State	City & State		ļ		Not Applicable		
Zip Country	Zip Country			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 Registere	d Agent/Office		
		Name					
HERRICK, NORTON 2295 CORPORATE BLVD., NW		Streel Address (P.O. Box Number is Not Acceptable)					
STE. 222	Suite.		otc				
BOCA RATON FL 33431	City				FL	Zip Code	
SIGNATURE (Registered Agent Accepting Appointment). A GENERAL PARTNER THAT MUST	IS A CORPORATION, L T BE REGISTERED AN					NESS ENTITY	
11. Name(s) of General Partner(s)	Address of Sant Consent Contract		11b. City. State & Zip Code		11c.	Registration/ Document Number	
ROLLER HOCKEY OF COLORADO GP	2295 CORPORATE BLVD.,		BOCA RATON FL 33431		P96000014723		
			:1	.00002 -12/18 ****5	376 37-0 50.00	7618 1088012 ****550.00	
•		j					
•							
Note: General partners MAY NOT	be changed on this form	n; an amer	ndment must	be filed to cha	ange a g	eneral partner.	
12. I do hereby certify that the information supplied with it Corporations from any liability of non-compliance will this annual report is true and accurate and that my sign empowered to execute this report as required by the	his filing is voluntarily turnished and does no Section 119 07(3)(k) in the event that the jul mature shall have the same logal effects as pler 620, Florida Statules	ot qualify for the endomation supplier if made under oa	xemption stated in Sect d is deemed exempt for th. I further certify that I	tion 119.07(3)(k), Florida om public access I furth I am a General Partner of	Statutes. I rele or certify that t the limited pa	ase the Division of ne information indicated on increship, receiver or trustee	
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