

FILE ON OR BEFORE APRIL 9, 1997 TO AVOID REVOCATION  
AND \$500 PENALTY FEE

LIMITED PARTNERSHIP  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra Northam  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

97 APR -8 AM 9:48



1. Name of Limited Partnership	1a. DOCUMENT # A96000000387
RATLIFF FAMILY LIMITED PARTNERSHIP	

Mailing Address 1800 SECOND ST. STE. 755 SARASOTA FL 34236	Principal Office Address 1800 SECOND ST. STE. 755 SARASOTA FL 34236	3. Date Formed or Registered 02/27/1996	5a. Capital Contributions as Shown on record. \$250,000.00
		3a. Date of Last Report	5b. Amount of Capital Contributions in FLORIDA to date: - 0 -
		4. State or Country of Formation FL	
		6. FEI Number <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable	
		7. Certificate of Status Desired <input type="checkbox"/> \$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 PETERSON, RENNO L 1800 SECOND ST. STE. 755 SARASOTA FL 34236	10. If changed, new Registered Agent/Office Name ROBERT J. RATLIFF Street Address 12785 MYERS CLUB CIRCLE Suite, Apt. #, etc. City FT. MYERS FL 33919
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) <i>[Signature]</i> DATE 4/4/97	

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) ROBERT JOE RATLIFF, TRUSTEE VIRGINIA ANN RATLIFF, TRUSTEE	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 12785 MYERS CLUB CIRCLE 18002 BEACON COVE LANE 12785 MYERS CLUB CIRCLE	11b. City, State & Zip Code FT. MYERS FL 33919 FT. MYERS FL 33919	11c. Registration/Document Number 600002142416--0 -04/14/97--01159--017 ****156.25 ****156.25
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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

*[Signature]*

R. J. Ratliff

DATE

4/4/97

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

CR2E003 (11/96)