FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO 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

DOCUMENT# A96000000564

97 DEC 19 PH 1: 04

SECHLIANY OF STAFE TALLAHASSEE FLORIDA



DOSS/GORMAN FAMILY LIMITED PARTNERSHIP			T 180 PATH DOUB DOTHER DATHER DATES DOUBLE DATES DATES DATES DOUBLE DISTRIBUTION OF THE BANK DATES DATES DATES			
					9/12/29	
Mailing Address	Principal Office Address		3. Date Formed or Re	gistered 5a. Cer Sho	oital Contributions as own on record.	
21 TIDY ISLAND BLVD.	21 TIDY ISLAND BLVD.	21 TIDY ISLAND BLVD. BRADENTON FL 34210		03/22/1996 3a. Date of Lest Report \$1,378,857.56		
BRADENTON FL 34210	-					
			12/02/1996	5b. Am	ount of Capital tributions in FLORIDA	
2. Malling Address	28. Principal Office Address	28. Principal Office Address		Formation 10 c	ate:	
				₹ 1,	¥ 1,378,857.50	
Sulte, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc. City & Stato			Applied For Not Applicable	
City & State	City & Stato					
		7ip Country		Desired	\$8.75 Additional Fee Required	
Zip Country	N.D.			Make check payable to: Dept. of State (See reverse side for fee information)		
9. Name and Address of Current Registered Agent		10. If changed, now Registered Agent/Office				
. SHELDRICK, MERCIA M 21 TIDY ISLAND BLVD.		Name				
		Street Address (P.O. Box Number Is Not Acceptable)				
BRADENTON FL 34210		Sulte, Apt. #, etc.				
		City			Zip Code	
400 0	0.1051 and 620.192, Florida Statutes, the above-na			<u>FL</u>	<u> </u>	
for the purpose of changing its registere agent. I am familiar with, and accept the	d office or registered agent, or both, in the State of obligations of section 620 192, Florida Statutes.			tner(s). I hereby accept th		
SIGNATURE (Registered Agent Accepting Appoin	THAT IS A CORPORATION	LIMITED	DADTNEDCUID OD	OTHER BUC	INIECC ENITITY	
A GENERAL PARTNER	MUST BE REGISTERED A	ND ACTIV	E WITH THIS OFFI	CE.	INESS ENTITY	
11. Name(s) of General Partner(s)	11a. Address of Each Ger (Do NOT Use Post Office	neral Partner Box Numbers)	11b. City, State & Zip Co	de 11c.	Registration/ Document Number	
SHELDRICK, MERCIA M		-121- TIDY ISLAND BLVD.			CENTRAL COLUMN	
		<u>.</u>	200	902365 -12/30/871 *****\$41.25	に <u>52</u>	
1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1						
Note: General partners MA	Y NOT be changed on this fo	rm; an ame	ndment must be filed	to change a ç	jeneral 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 Socion 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 each. I further certify that I am a General Partner of the limited partnership, receiver or trustee

Typed or Printed Name of General Partner Signing Form

December 16, 1997

Daytime Telephone Number (941) 792 - 3945 Mercia M. Sheldrick