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**

DOCUMENT#

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 DEC 10 PM 3: 16

To realise of Estimost Estatusing	A9600000791					RIVIN		
MCDANIEL FAMILY PARTNER								
Mailing Address	Principal Office Address	Principal Office Address			Formed or Registered 5a. Capital Contributions as Shown on record.			
9252 SAN JOSE BLVD NO. 701 JACKSONVILLE FL 32257	9252 SAN JOSE BLVD., NO. 701 JACKSONVILLE FL 32257			04/25/1996 3a. Date of Last Report	525,000.00	į į		
			12/12/1997 4. State or Country of Formation		5b. Amount of Capital Contributions in FLORIDA to date:			
2. Malling Address	2a. Principal Office Address	2a. Principal Office Address			\$525,000.00			
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			Applied For			
City & State	City & State	City & State		59-7072618 7. Certificate of Status Desired	Not Applicable \$8.75 Additional		-	
Zip Country	Zip	Country	Re Required 8. Make check payable to: Dept. of State (See reverse side for fee inform			Fee Required	, l	
		 -		40			#	
9. Name and Address of Currer		Name	10. If changed, new Registered Agent/Office					
BRANT, MOORE, MACDONALD & WELLS, P.A. 50 N. LAURA STREET, SUITE 3100			Street Address (P.O. Box Number Is Not Acceptable)					
JACKSONVILLE FL 32202		Suite, Apt. #, etc.					-	
			City			Zip Code		
10a. Pursuant to the provisions of sections 620.1051 at for the purpose of changing its registered office or agent, I am familiar with, and accept the obligation SIGNATURE (Registered Agent Accepting Appointment)	registered agent, or both, in the State of Flori is of section 620.192, Florida Statutes.	da. Such chang	ge was autho	rized by its general partner(s). I hereb	y accept the a	pointment of registered	=	
A GENERAL PARTNER THAT	TIS A CORPORATION, I OT BE REGISTERED AN	IMITED D ACTIV	PART VE WIT	NERSHIP OR OTHE H THIS OFFICE.	R BUSI	NESS ENTITY	_	
11. Name(s) of General Partner(s)	11a. Address of Each General (Do NOT Use Post Office Bo	dress of Each General Partner OT Use Post Office Box Numbers)		11b. City, State & Zip Code		Registration/ Document Number		
R. L. MCDANIEL ENTERPRISES,	9252 SAN JOSE BLVD.,	9252 SAN JOSE BLVD.,		JACKSONVILLE FL 32257		P96000034407 89 80 80 80 80 80 80 80 80 80 80 80 80 80		
				000002 -12/28 ****S	722 788-0 26.25	7602 1008011 ****526.25	CR2E	
N. d. C.				t was the Stad to also				
Note: General partners MAY NOT 12. I do hereby certify that the information supplied with Corporations from any liability of non-compliance wit this annual report is true and accurate and that my si empowered to execute this report as required by cha	this filing is voluntarily furnished and does not h Section 119.07(3)(k) in the event that the inlignature shall have the same legal effects as in apter 620, Florida Statutes.	qualify for the formation supp	exemption st	ated in Section 119.07(3)(k), Florida S of exempt from public access. I further certify that I am a General Partner of	tatutes. I relea certify that the the limited part	se the Division of hiformation indicated on nership, receiver or trustee	,	
SIGNATURE Helen B.	n= Daniel			DATE_	2-7-	98	-	

SIGNATURE	Helen	D.	ma	Dan	iel
		,		! D	

Daytime Telephone Number (904) 636-8932 Typed or Printed Name of General Partner Signing Form _