## 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 # **A9600001222** 

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

97 SEP. 30 AM 10: 51



2. Mailing Address  28. Principal Office Address  FL  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  Tourity	BERKSHIRE PARTNERS (1996), LTD.			# 10000011	
2. Mailing Address  2a. Principal Office Address  2a. Principal Office Address  FL  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  City & State  Country  To Country  To Country  To Country  B. Make check payable to: Dept. of Status (See reverse elde for fee info fee Required Agent/Office)  MOTTICE, H. JAY  **State FL 33333**  **Name**  MOTTICE, H. JAY  **THEN: MONROE-STREET, OUTTE 200  TALLAHAGSEE FL 33333*  **Street Address of Current Registered Agent Agen	S HERMITAGE BLVD.  1834 HERMITAGE BLVD.  18201  SUITE 201			06/27/1996	
Suite, Apt. #, etc.  City & State  City & State  City & State  To Country  Zip  Country  Zip  Country  Zip  Country  To Country  B. Make check payable to: Dept. of State (See reverse side for fee info  Name  MOTTICE, H. JAY  2111 N. MONROE STREET, OUTTE 200  TALLA HASSEE FL 32303  TO LACASSEC  FL  Zip Code  To Lacassec					<b>5b.</b> Amount of Capital Contributions in FLORIDA to date:
City & State  7. Certificate of Status Desired  \$8.75 Addition Fee Required  8. Make check payable to: Dept. of State (See reverse side for fee info  9. Name and Address of Current Registered Agent  Name  Name  Name  Street Address (P.O. Box Number is Not Acceptable)  10. If changed, new Registered Agent/Office  Name  Street Address (P.O. Box Number is Not Acceptable)  11. Hown is the provisions of sections 620 100 t and 620 192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this stat 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 Accepting Appointment)  SIGNATURE (Registered Agent Accepting Appointment)  DATE  1. DATE					<u> </u>
Zip Country Zip Country 8. Make check payable to: Dept. of State (See reverse side for fee info  9. Name and Address of Current Registered Agent  10. If changed, new Registered Agent/Office  Name  Nortice, H. JAY  2111 N. MONROE STREET, OUTE 200  TALLAHASSEE FL 32303  Size, Apt. #, etc. 0.  Tallahassee FL 32303  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 state for 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 appointment of registered Agent. (am familiar with, and accept the obligations of section 620 192, Florida Statutes.  SIGNATURE (Registered Agent Accepting Appointment)	City & State	City & State			Not Applicable
Name  Name  Name  Street Address (P.O. Box Number Is Not Acceptable)  1834 Hermitage Bivs.  Sub-Apt. #, etg_O.  Touchasses FL 33308  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 state for 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 appointment of registered Agent Accepting Appointment)	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)	
MOTTICE, H. JAY 2111 N: MONROE-STREET, OUTIE-208 TALLAHASSEE FL 32303  Street Address (P.O. Box Number Is Not Acceptable) 1834 Herm: 1402 Blvd.  Street Address (P.O. Box Number Is Not Acceptable) 1834 Herm: 1402 Blvd.  Sub-Apt. #, et2.01  Touchasses FL 23208  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 state for 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 appointment of registered Agent Accepting Appointment)  SIGNATURE (Registered Agent Accepting Appointment)  DATE	9. Name and Address of Curre	nt Registered Agent		10. If changed, new Registere	ed Agent/Olfice
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 state 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)	MOTTICE, H. JAY 2111 N. MONROE STREET, SUITE 208		Street Address (P.Q. Box Number Is Not Acceptable)		
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENT MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.	SIGNATURE (Registered Agent Accepting Appointment) _ A GENERAL PARTNER THAT	IS A CORPORATION, LIF		RTNERSHIP OR OTHE	
Address of Each General Partner 445 Cit State 7 a Code 44 Registration/					11c. Registration/ Document Number
BERKSHIRE (1996), INC.  -2111 N: MONROE STREET  1834 Hermitage Blvd.  Ste 201  TALLAHASSEE FL 32308  P96000054982	BERKSHIRE (1996), INC.	-2111 N: MONROE STREET 1834 Hermitage B	T.	ALLAHASSEE FL 32308	P96000054982
90002310689 -10/02/9701124007 ****541.25 ****541.2				-10/02	/3701124007
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partners	Note: General partners MAY NO	T be changed on this form;	an amendr	nent must be filed to ch	ange a general partner.
12. I do sereby 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 indicates an exemption of the section of the secti	Corporations from any liability of non-compliance w this annual report is true and accurate and that my empowered to execute this report or required by c	ilh Soction 119.07(3)(k) in the event that the information in the same legal effects as if napter 629. Florida Statutes.	nation supplied is d nade under oath. I f	deemed exempt from public access. I furt further certify that I am a Genoral Pariner (	ther certify that the information ind cated on of the limited pertnership, receivor or trustee
SIGNATURE DATE  Typed or Printed Name of General Partner Signing Form H. Qay Mottice Daytime Telephone Number 850-386-2117				Doubling Talantan Allert	58-386-2117