

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 DEC -7 PM 3:41

1. Name of Limited Partnership

1a. DOCUMENT #
A96000001250

TAMPA I ASSOCIATES, LTD.



Mailing Address

95 SOUTH FEDERAL HIGHWAY, SUITE 200
BOCA RATON FL 33432

Principal Office Address

95 SOUTH FEDERAL HIGHWAY, SUITE 200
BOCA RATON FL 33432

3. Date Formed or Registered

07/02/1996

3a. Date of Last Report

09/22/1997

5a. Capital Contributions as
Shown on record.

\$3,150,000.00

5b. Amount of Capital
Contributions in FLORIDA
to date:

4. State or Country of Formation

FL

6. FEI Number

65-068507 0685507

☐ Applied For
☐ Not Applicable

7. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

8. Make check payable to: Dept. of State (See reverse side for fee information)

2. Mailing Address

95 So. FEDERAL Hwy
Suite Apt # etc.
#205

2a. Principal Office Address

95 So. FEDERAL Hwy
Suite Apt # etc.
#205

City & State
BOCA RATON FL

City & State
BOCA RATON FL

Zip Country
33432 USA

Zip Country
33432 USA

9. Name and Address of Current Registered Agent

SONGY, DAVID B
95 SOUTH FEDERAL HIGHWAY, SUITE 200
BOCA RATON FL 33432

10. If changed, new Registered Agent/Office

Name

95 So. FEDERAL Hwy
#205
BOCA RATON FL 33432

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)

DATE

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)

FLORIDA OFFICE CORP.
SONGY PARTHERS LIMITED

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

ONE CHASE MANHATTAN P
95 SOUTH FEDERAL HIGH

11b. City, State & Zip Code

NEW YORK NY 10025
BOCA RATON FL 33432

11c. Registration/
Document Number

F96000003355
A33386

000002708350--0
-12/10/98--01010--005
****526.25 ****526.25

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

DATE 12/2/98

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

CR2E003 (8/98)