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

1. Name of Limited Partnership

DOCUMENT#

98 DEC 31 PM 3: 15

SECRETARY OF STATE

To the standard and standard	A96000001320		TALLAHASSEE, FLORIDA			
THE DANPAT1 LIMITED PARTNERSHIP						
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.		
4955 VELASQUEZ PENSACOLA FL 92504	4855 VELASQUEZ PENSACOLA FL 32504		07/12/1996 3a. Date of Last Report	\$150,000.00		
			03/27/1998	5b. Amou Contr	int of Capital ibutions in FLORIDA	
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	to date:		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For		
City & State	City & State		7. Certificate of Status Desired	Not Applicable \$8.75 Additional		
Zip Country	Zip Country			\$8.75 Additional Fee Required ept. of State (See reverse side for fee information)		
9. Name and Address of Current Registered Agent			10. If changed, new Registered Agent/Office			
KAHN, HARRY D JR. 4855 VELASQUEZ PENSACOLA FL 32504		Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code				
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)						
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)	Address of Each General (Do NOT Use Post Office Box	Partner x Numbers) 11b	City, State & Zip Code	11c.	Registration/ Document Number	
KAHN, HARRY D JR.	4855 VELASQUEZ	Į.	PENSACOLA FL 32504		80/8/	
KAHN, PATRICIA B	4855 VELASQUEZ _		PENSACOLA FL 32504		CROEFING (RIGH	
			700002 -01/19/ *****52	/9901	2278: 003013 *****526.25	
Note: General partners MAY NOT b	e changed on this form	r an amendr	nent must be filed to cha	nge a ge	nersi nartner	
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 520, Florida Statutes.						
SIGNATURE HOLLING DATE 1418/98 ULD DAY TE K AND TO DE US 7-7989						
Typed or Printed Name of General Partner Signing Form Ho DANTE KAHN, JR Daytime Telephone Number 850-435 1787						