FILE ON OR BEFORE APRIL 7, 1999 TO AVOID REVOCATION AND $500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT **1999**

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

A96000001413

99 MAR -9 PM 2:57

1. Name of Limited Partnership

1a. DOCUMENT # A96000001413

LEWIS FAMILY LIMITED PARTNERSHIP

Mailing Address	Principal Office Address
P.O. BOX 59825 PANAMA CITY, FL 32412-0825	1328 JENKS AVENUE PANAMA CITY, FL 32401

3. Date Filed for Registration: 07/30/1996

3a. Date of Last Report: 03/31/1998

4. State or Country of Formation: FLORIDA

5a. Capital Contributions as Shown of record: 2,525,000.00

5b. Amount of Capital Contributions in FLORIDA to date: 2,525,000.00

6. FEI Number: 59-3401342 — ☐ Applied For ☐ Not Applicable

7. Certificate of Status Desired ☐ $8.75 Additional Fee Required

8. Make Check payable to Dept. of State

2. Mailing Address
Suite, Apt. #, etc
City & State
Zip Country

2a. Principal Office Address
Suite, Apt. #, etc
City & State
Zip Country

9. **Name and Address of Current Registered Agent**

LEWIS, JAMES E.
1328 JENKS AVENUE
PANAMA CITY, FL 32401

10. If changed new Registered Agent/Office
Name
Street Address (P.O. Box Number is not Acceptable)
Suite, Apt. #, etc.
City FL Zip Code

000002908240--2
-03/16/99--01097--004
****526.25 ****526.25

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)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/Document Number
LEWIS, JAMES E.	1328 JENKS AVENUE	PANAMA CITY, FL 32401	
LEWIS, LIDA N.	1328 JENKS AVENUE	PANAMA CITY, FL 32401	

BK 3/9/99

CR2E003 (12/98)

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)(x), Florida Statutes. I relieve 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 James E. Lewis DATE 3/8/99

Typed or Printed Name of General Partner Signing Form: JAMES E. LEWIS — Daytime Telephone Number: 850 769-8927