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

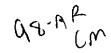
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # **A96000001488**

BRIDPORT ASSOCIATES, LTD.



FILED 97 NOV 24 AM 9: 13 SECRETARY OF STATE TALLAHASSEE, FLORIDA



Malling Address	Principal Office Address 5070 HIGHWAY A1A, SUITE 204 VERO BEACH FL 32963		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.
5070 HIGHWAY A1A. SUITE 204 VERO BEACH FL 32963			08/08/1996 38. Date of Last Report	\$650,000.00
			02/24/1997	5b. Amount of Capital Contributions in FLORIDA
2. Mailing Address 5099 Highway AlA, Ste. C	2a. Principal Office Address 5099 Highway AlA, Ste. C		4. State or Country of Formation	to date:
Suite, Apt. #, etc. Vero Beach, FL	Suite, Apt. #, etc. Vero Beach, FL		6. FEI Number 65-0653239 APPLIED FOR APPLIED FOR	
City & State 32963 USA	City & State 32963 USA		7. Certificate of Status Desired	☐ Not Applicable \$8.75 Additional
Zip Country	Zip Country		8. Make check payable to; Dept. of	Fee Required State (See reverse side for fee Information)
9. Name and Address of Current Registered Agent 10. Is shanged new Registered Agent/Office				d Agent/Office
DRAGONE, ALLAN R 5070 HIGHWAY A1A, SUITE 204 VERO BEACH FL 32963		Allan R. Dragone Street Address (P.O. Box Number is Not Acceptable) 5099 Highway AlA Suite C City Vero Beach FL Zip Code 32963		
10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutos, 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 the provision of the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the provision of the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the provision of the State of Florida, submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the provision of the State of Florida, submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes -12/02/9701060008 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)	11a. Address of Each Gener		City, State & Zip Code	11c. Registration/ Document Number
DRAGONE, ALLAN R DRAGONE, JANE B	5099 Highway Al 5070 HIGHWAY ATA, SUI 5099 Highway Al 5070 HIGHWAY ATA, SUI	A. Suite C	RO BEACH FL 32963 RO BEACH FL 32963	Ed of sweller
Note: General partners MAY NOT I	e changed on this form	n; an amendm	ent must be filed to cha	inge 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 will Section 119.07(3)(x) in the event that the information supplied is deemed exempt from public access. I think certify that the information indicated on this annual report is true and accurate and flightny signature shall have the same legal effects as if made under eath. I further certify that I am a General Partner of the limited partnership, receiver or trusted

SIGNATORIL LITTLE STATE

Typed or Printed Name of General Partner Signing Form

Allan R. Dragone

DATE 11-19-97

Daylime Telephone Number 61-234-5227