

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

LIMITED PARTNERSHIP
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 FEB 26 AM 10:20



1. Name of Limited Partnership		1a. DOCUMENT # A96000001670	
TARKILN BAYOU DEVELOPERS, LTD.			
Mailing Address 421 NORTH PALAFOX STREET PENSACOLA FL 32501		Principal Office Address 421 NORTH PALAFOX STREET PENSACOLA FL 32501	
2. Mailing Address		2a. Principal Office Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip Country		Zip Country	

3. Date Formed or Registered 09/09/1996	5a. Capital Contributions as Shown on record \$1,000,000.00
3a. Date of Last Report 02/27/1998	5b. Amount of Capital Contributions in FLORIDA to date \$ 200,000.00
4. State or Country of Formation FL	6. FEI Number 59-3400294 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
7. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
8. Make check payable to Dept. of State (See reverse side for fee information)	

9. Name and Address of Current Registered Agent WHIBBS, VINCENT J JR. 421 NORTH PALAFOX STREET PENSACOLA FL 32501	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code
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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) TARKILN BAYOU DEVELOPMENT CO	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 421 NORTH PALAFOX STR	11b. City, State & Zip Code PENSACOLA FL 32501	11c. Registration/ Document Number P96000039842 700002794977-0 -03/04/99--01090--006 ****526.25 ****526.25 52 3-3-99
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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

Vincent J. Whibbs, President
TARKILN Bayou Development Company, Inc.

DATE

2-8-99

Daytime Telephone Number

850-434-5395

CR2E003 (12/98)