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# A96000001956

98 SEP 18 PM 2: 04

S.D. AND IDA AVERETT FAMILY LIMITED PARTNERSHIP						
Malling Address 1758 CLAREDON AVENUE LAKELAND FL 33803 2. Mailing Address Suite, Apt. #, etc. City & State		Principal Office Address 1758 CLAREDON AVENUE LAKELAND FL 33803 28. Principal Office Address Sulte, Apt. #, etc. City & State		3. Date Formed or Registered 10/21/1996 3a. Date of Last Report 11/19/1997 4. State or Country of Formation FL 6. FEI Number 59-3410392 7. Certificate of Status Desired	5a. Capital Contributions as Shown on record. \$421,000.00 5b. Amount of Capital Contributions in FLORIDA to date: \$421,000.00 Applied For Not Applicable \$8.75 Additional Fee Regulard	
Zip	Country	Zip	Zip Country		8. Make check payable to: Dept. of State (See reverse side for fee Information)	
10a. Pursuant to for the purposegent. I am f	LORIDA AVENUE 33801 the provisions of sections 620.10: use of changing its registered office smillier with, and accept the oblig red Agent Accepting Appointmen AL PARTNER TH	51 and 620.192, Florida Statutes, the above-na se or registered agent, or both, in the State of F ations of section 620.192, Florida Statutes.	Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. -09/22/9800082007 City #***526.25 Statules, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement r both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered 2, Florida Statutes. DATE RPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY SISTERED AND ACTIVE WITH THIS OFFICE.			
AVERETT, IDA	NFORD D JR	1758 CLAREDON AVEN	NUE	LAKELAND FL 33803 LAKELAND FL 33803	11c. Registration/ Document Number	

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 ___