FILE ON OR BEFORE APRIL 9, 1997 TO AVOID REVOCATION
AND $500 PENALTY FEE

**LIMITED PARTNERSHIP
ANNUAL REPORT
1997**

FLORIDA DEPARTMENT OF STATE
Sandra Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 APR -3 AM 8: 52

1. Name of Limited Partnership

1a. DOCUMENT #
A96000002078

YECKES FAMILY LIMITED PARTNERSHIP #1, LTD.

Mailing Address	Principal Office Address
342 EAGLE DRIVE	342 EAGLE DRIVE
JUPITER FL 33477	JUPITER FL 33477

3. Date Formed or Registered
11/07/1996

3a. Date of Last Report

5a. Capital Contributions as Shown on record.
$1,500,000.00

4. State or Country of Formation
FL

5b. Amount of Capital Contributions in FLORIDA to date:
1,500,000

2. Mailing Address | **2a.** Principal Office Address

Suite, Apt. #, etc. | Suite, Apt. #, etc.

City & State | City & State

Zip | Country | Zip | Country

6. FEI Number
☐ Applied For
☐ Not Applicable

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

8. Make check payable to: Dept. of State (See reverse side for fee information)

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9. Name and Address of Current Registered Agent

YECKES, JOYCE
342 EAGLE DRIVE
JUPITER FL 33477

10. If changed, new Registered Agent/Office

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) _____ 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
Joyce Yeckes	342 Eagle Drive	Jupiter, Fl. 33477	ae 4-3

CR2E003 (11/96)

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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 _Joyce S. Yeckes_ DATE _4/1/97_

Typed or Printed Name of General Partner Signing Form _JOYCE T. YECKES_ Daytime Telephone Number _(561) 743-0134_