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. Mertham

Secretary of State **DIVISION OF CORPORATIONS**

1. Name of Limited Partnership

A9600002078

98 JAN -2 AM 8: 56



YECKES FAMILY LIMITED PARTNERSHIP #1, LTD.							
				3. Date Formed or Registered	5 9 0	I Contribution	
Malling Address	Principal Office Address	Principal Office Address		3. Date Furthed of Registered	5a. Capital Contributions as Shown on record.		
342 EAGLE DRIVE	342 EAGLE DRIVE			11/07/1996	\$1,500,000.00		
JUPITER FL 33477	JUPITER FL 33477	JUPITER PL 33477		3a. Date of Last Report			_
				04/03/1997 4. State or Country of Formation	5b. Amou Contri	nt of Capital butions in FLORIDA	
2. Malling Address	2a. Principal Office Address	2a. Principal Office Address			to date:		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			6.) Et Number 65-07046/5 Applied For		
City & State	City & State	City & State		ATTILE + OR			
Zip Country	Zip	Zip Country		7. Certificate of Status Desired	\$8.75 Additional Fee Required		
<u> </u>				8. Make check payable to: Dept. of	State (See reve	erse side for fee informati	on)
9. Name and Address of C	Current Registered Agent			10 If changed new Projectors	d Apont/Office		
24 Lingua auth wordsess of Antiant vehiclean whentr		Name	10. If changed, new Registered Agent/Office Name				
YECKES, JOYCE		Street Address (P.O. Box Number Is Not Acceptable)					_
342 EAGLE DRIVE		, , , , , , , , , , , , , , , , , , ,					
JUPITER FL 33477		Suite, Apt. #, etc.					
		City			FL	Zip Code	
SIGNATURE (Registered Agent Accepting Appointme A GENERAL PARTNER TH	onl)	LIMITED	PART VE WIT	DATE NERSHIP OR OTHE TH THIS OFFICE.		IESS ENTITY	
11. Name(s) of General Partner(s)	11a. Address of Each Gene (Do NOT Use Post Office		11b.	City, State & Zip Code	11c.	Registration/ Document Number	-
YECKES, JOYCE	342 EAGLE DRIVE					\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
1					2246		
Note: General partners MAY N						<u> </u>	
this annual report is true and accurate and that empowered to execute this report as required to	ce with Section 119.07(3)(k) In the event that the my signature shall have the same legal effects a	information supp as if made under	olied is deem	ed exempt from public access. I further	er certify that the	information indicated o	n ee
SIGNATURE		1		DATE	<u> </u>	7 /	_
Typed or Printed Name of General Partner Signing Por	JOYCK 7. Y	ECKE	-3	Daytime Telephone Number	01)74	3-0134	-