

**FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP
ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

A96000002158

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 DEC 17 PM 1:11

1. Name of Limited Partnership Sansing Family Partnership, Ltd.		1a. DOCUMENT # A96000002158	
Mailing Address 4875 Manomette Pensacola, Florida 32504		Principal Office Address (Same)	
2. Mailing Address Same		2a. Principal Office Address Same	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip		Zip	
3. Date Formed or Registered 11/25/96		5a. Capital Contributions as Shown on record \$784,000.00	
3a. Date of Last Report		5b. Amount of Capital Contributions in FLORIDA to date Same	
4. State or Country of Formation Florida		6. FEI Number <input checked="" 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)	

BK 12/17/96

9. Name and Address of Current Registered Agent Robert C. Sansing 4875 Manomette Pensacola, Florida 32504		10. If changed, new Registered Agent/Office	
		Name (Same agent, but different address)	
		Street Address (P.O. Box Number is Not Acceptable) 4875 Manomette	
		Suite, Apt. #, etc.	
		City Pensacola	Zip Code FL 32504

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
Robert C. Sansing	4875 Manomette	Pensacola, FL 32504	A96000002158
Peggy Sudderth Sansing	4875 Manomette	Pensacola, FL 32504	A96000002158

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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 Robert C. Sansing DATE 12/04/96
Typed or Printed Name of General Partner Signing Form Robert C. Sansing Daytime Telephone Number _____

CRE003 (6/96)