

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

**LIMITED PARTNERSHIP
ANNUAL REPORT
1997**



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 DEC 26 AM 11:36

1. Name of Limited Partnership

1a. DOCUMENT #
A96000002273

William D. Kirkpatrick Family Limited Partnership

Mailing Address:

Principal Office Address:

William D. Kirkpatrick
218 Commercial Boulevard, Suite 208K
Lauderdale By The Sea, Florida 33308

3. Date Formed or Registered

12/11/96

5a. Capital Contributions as
Shown on record

\$10,000.00

3a. Date of Last Report

5b. Amount of Capital
Contributions in FL ORIDA
to date

\$10,000.00

2. Mailing Address

William D. Kirkpatrick

Suite, Apt. #, etc.

218 Commercial Blvd(208K)

City & State

Lauderdale By The Sea, FL

Zip

33308

Broward

2a. Principal Office Address

William D. Kirkpatrick

Suite, Apt. #, etc.

218 Commercial Blvd(208K)

City & State

Lauderdale By The Sea, FL

Zip

33308

Broward

4. State or Country of Formation

Broward County
Florida

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)

9. Name and Address of Current Registered Agent

William D. Kirkpatrick
218 Commercial Boulevard, Suite 208K
Lauderdale By The Sea, Florida 33308

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc.

City

900002045609--2

-01/03/97--01147--026

****208.75 ****208.75

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

William D. Kirkpatrick

1443 So. Ocean Blvd
(House #10)

Pompano Beach,
Florida 33062

NA

FF# 700
Sup# 138.5
CR 1-2-97

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 *William D. Kirkpatrick*

DATE 12/23/96

Typed or Printed Name of General Partner Signing Form William D. Kirkpatrick

Daytime Telephone Number (954) 772-8990

CR2E003 (6/96)