

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	
1. Name of Partnership BOYKIN FAMILY LIMITED PARTNERSHIP		1a. DOCUMENT # A96000002514	
2. Mailing Address 6 Alford Court Palm Beach Gardens, FL 33418		3. Date Formed or Registered 12/31/96	
2a. Principal Office Address 6 Alford Court Palm Beach Gardens, FL 33418		3a. Date of Last Report	
2b. City & State Palm Beach Gardens, FL		4. State or Country of Formation Florida	
2c. Zip 33418		5a. Capital Contributions (See Reverse Side) \$10,000.00	
2d. Country USA		5b. Amount of Capital Contributions in Florida to date \$10,000.00	
2e. City & State Palm Beach Gardens, FL		6. FET Number ☒ Applied For ☐ Not Applicable	
2f. Zip 33418		7. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
2g. Country USA		8. Make check payable to: Dept. of State (See reverse side for instructions)	
9. Name and Address of Current Registered Agent John D. Boykin, Esq. 515 North Flagler Drive, 19th Floor West Palm Beach, FL 33401		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. For each change provided in sections 620.1051 and 620.121 Florida Statutes, the above named limited partnership organized or registered under the laws of the State of Florida, submits its statement of formation, purpose of change, and 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, and I am familiar with and accept the obligations of section 620.192 Florida Statutes.		DATE 1/18/97	
SIGNATURE: Registered Agent Accepting Appointment			
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.			
11. Name of General Partner(s) Boykin, Marybeth T.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 3200 Tanya Drive	11b. City, State & Zip Code Wilmington, DE 19803	11c. Registration Document Number FF \$70.00 Sup \$138.75 OK 2-10
400002084604--0 -02/11/97--01197--005 ****208.75 ****208.75			
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.			
12. I 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 Marybeth T. Boykin		DATE 1/18/97	
Typed or Printed Name of General Partner Signing Form Marybeth T. Boykin		Daytime Telephone Number (302) 478-1574	