## FILE ON OR BEFORE APRIL 8,1998 TO AVOID REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP TANNUAL REPORT
1998

EIDRT COLITH LEACING IL LTD



FLORIDA DEPARTMENT OF STATE

Sandça B. Mo: ham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

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1a. DOCUMENT # **A97000000414** 

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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Mailing Address P.O. BOX 56530 JACKSONVILLE FL 32241-6530	Principal Office Address 11100 SAN JOSE BLVD. JACKSONVILLE FL 32223	3. Date Formed or Registered 02/17/1997 38. Date of Lest Report	5a. Capital Contributions as Shown on record. \$9,900.00  5b. Amount of Capital Contributions in FLORIDA to the latest and the contributions of the contributions of the contributions in FLORIDA to the contributions of the contributions as Shown on record.
2. Malling Address	28. Principal Office Address	4. State or Country of Formation	Contributions in FLORIDA to date:
Suite, Apt. #, etc.	Suite, Apt. #, etc.	6. FEI Number APPLIED FOR	Applied For
City & State	City & State	7. Certificate of Status Desired	Not Applicable  \$8.75 Additional
Zip Country	Zip Country		Fee Required    State (See reverse side for fee information)
9. Name and Address of Current Registered Agent		10. If changed, new Registered Agent/Office	
for the purpose of changing its registered office or registered agent, or both, in the State agent. I am familiar with, and accept the obligations of section 620-192, Florida Statutes.  SIGNATURE (Registered Agent Accepting Appointment)  A GENERAL PARTNER THAT IS A CORPORATION		Street Address (P.O. Box Number Is Not Acceptable)  Suite, Apt. #, etc.  City  FL  Zip Code  -named limited partnership organized or registered under the laws of the State of Florida, submits this statement of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered  DATE  N, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY AND ACTIVE WITH THIS OFFICE.	
11. Name(s) of General Partner(s)	Address of Each General Partner (Do NOT Use Post Office Box Numbers	<del></del>	11c. Registration/ Document Number
FIRST SOUTH SERVICES, INC.	11100 SAN JOSE BLVD.	JACKSONVILLE FL 32223	<b>P\$300005488</b> 4 3 6 7 4 6 7 7 7 7 7 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8
NAT Description MAY NO	OT be changed on this form: an a		4987467 /3801004013 38,75 *****88.75

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 \_\_\_\_\_

Brown

TE 3/30/98

CR2E003 (12/9)