

FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 FEB 15 PM 1:57

1. Name of Limited Partnership

1a. DOCUMENT #
A97000000424

CHARLES LABIANCO FAMILY LIMITED PARTNERSHIP



Mailing Address

P.O. BOX 328
TARPON SPRINGS FL 34688

Principal Office Address

P.O. BOX 328
TARPON SPRINGS FL 34688

3. Date Formed or Registered

02/18/1997

5a. Capital Contributions as
Shown on record.

\$1,000.00

3a. Date of Last Report

01/16/1998

5b. Amount of Capital
Contributions in FLORIDA
to date:



4. State or Country of Formation

FL

6. FEI Number

59-3427809

☐ 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)

2. Mailing Address

426 QUAIL HOLLOW ROAD
Suite, Apt. #, etc.

2a. Principal Office Address

426 QUAIL HOLLOW ROAD
Suite, Apt. #, etc.

City & State
AUBURNDALE, FL.
Zip Country
33823 USA

City & State
AUBURNDALE, FL.
Zip Country
33823 USA

9. Name and Address of Current Registered Agent

LABIANCO, JAYNE
208 DRIFTWOOD DRIVE SOUTH
PALM HARBOR FL 34683

10. If changed, new Registered Agent/Office

Name JAYNE LABIANCO
Street Address (Post Box Number is Not Acceptable)
426 QUAIL HOLLOW ROAD
Suite, Apt. #, etc.
City AUBURNDALE FL 33823

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)

Jayne Labianco

DATE

2/8/99

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)

LABIANCO, CHARLES
LABIANCO, JAYNE

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

426 Quail Hollow Rd.
-208 DRIFTWOOD DRIVE S
426 Quail Hollow Rd.
208 DRIFTWOOD DRIVE S

11b. City, State & Zip Code

Auburndale, FL 33823
PALM HARBOR FL 34683
Auburndale, FL 33823
PALM HARBOR FL 34683

11c. Registration/
Document Number

200002778442--8
-02/17/99--01076--002
****141.25 ****141.25

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

Charles Labianco

DATE

941-965-7622

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

CR2E003 (8/98)