## FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1998



JAYNE LABIANCO FAMILY LIMITED PARTNERSHIP

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

na. DOCUMENT # **A97000000425** 

## FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 JAN 16 PM 1:55



Mailing Address		Principal Office Address			3. Date Formed or Registered	<b>5a.</b> Capital Contributions as Shown on record.		
P.O. BOX 328 TARPON SPRINGS FL 34688		P.O. BOX 328 TARPON SPRINGS FL 34688			02/18/1997 3a. Date of Last Report	\$1,000.00		
					N. A.	<b>5b.</b> Amou Contr	int of Capital ibutions in FLORIDA	
2. Mailing Address 2a. Principal Office Address			4. State or Count		4. State or Country of Formation	to date:		
Suite, Apt. #, etc. Suite, Apt. #, etc.			6. FEI Number 65-0729004		\ <i>IL</i>	Applied For		
City & State		City & State	ity & State		7. Certificate of Status Desired	Certificate of Status Desired \$8.75 Additional		
Zip	Country	Zip Country			8. Make check payable to: Dept. of State (See reverse side for fee Information)			
9. Name and Address of Current Registered Agent					10. If changed, new Registered Agent/Office			
LABIANCO, JAYNE 208 DRIFTWOOD DRIVE SOUTH PALM HARBOR FL 34683				Name  Street Address (P.O. Box Numbel + Ing No.				
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. 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 (Do NOT Use Post Office B	al Partner	11b.	City, State & Zip Code	11c.	flegistration/ Document Number	
LABIANCO, CHARLES		208 DRIFTWOOD DRIVE S		PALM HARBOR FL 34683			É	
LABIANCO, JAYNE		208 DRIFTWOOD DRIVE	OOD DRIVE S		PALM HARBOR FL 34683		c c c c c c c c c c c c c c c c c c c	
					1/16/98		£	
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Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

1 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 doesned exempt from public access. I turther certify that the information indicated on this annual report is true and accurate and that my signature shall have the same logal effects as it made under eath. I further certify that I am a General Partner of the limited partnership, receiver or trusted empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

e of General Partner Signing Form JAYNE LA BIANC

DATE 1/13/98

one Number 813 - 938 - 4005