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

LIMITED PARTNERSHIP ANNUAL REPORT 1998

29 NORTH BOULEVARD OF THE PRESIDENTS



JANSEN W. AND KAY C. TAYLOR FAMILY LIMITED PARTN

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Pertnership

ERSHIP

Mailing Address

SARASOTA FL 34236

2. Mailing Address

Suite, Apt. #, etc.

City & State

na. DOCUMENT # **A97000000446** 

29 NORTH BOULEVARD OF THE PRESIDENTS

Principal Office Address

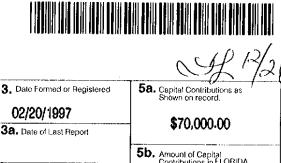
SARASOTA FL 34236

Suite, Apt. #, etc.

City & State

2a. Principal Office Address

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SECTION !	/s/ S.	cy SE	E.F	31, L <b>o</b> l	ili,



4. State or Country of Formation	lo date:
FL.	\$ 70,000
6. FEI Number	- Danilled Co.

5-0737638	Applied For Not Applicable
rtificate of Status Desired	<b>\$8.75</b> Additional Fee Required

			L Tr			
				8. Make check payable to: Dept. o	of State (See reverse side for fee Information)	
	Name and Address of C	turrent Devictored Reent		10 22-1	A Description	
9. Name and Address of Current Registered Agent			10. If changed, new Registered Agent/Office			
MORAN	, JOHN A ESQUIRE		Name			
1819 MAIN STREET, SUITE 700 SARASOTA FL 34236		Street Address (P.O. Box Number Is Not Acceptable)				
		Suite, Apt. #, etc.				
		City		Zip Code		
for t	he purpose of changing its registered of	51 and 620 192, Florida Statutes, the abo fice or registered agenl, or both, in the Sta gations of section 620.192, Florida Statute	te of Florida. Such change wa	organized or registered under the laws of s authorized by its general partnor(s). I ho	the State of Floridal submits this statement reby accept the appointment of registered	
SIGNATURE	(Registered Agent Accepting Appointme	ont) _		DATE	· - •	
A GE	NERAL PARTNER TH M	IAT IS A CORPORATION OF THE RESEARCH TO THE RESEARCH THE	ON, LIMITED PA	RTNERSHIP OR OTHE	ER BUSINESS ENTITY	
11. N	ame(s) of General Partner(s)	11a. Address of Each	General Partner Office Box Numbers)	City, State & Zip Codo	11c. Registration/ Decument Number	

 11. Name(s) of General Partner(s)
 11a. Addross of Each General Partner (Do NOT Use Post Office Box Numbers)
 11b. City, State & Zip Code
 11c. Registration/ Document Number

 TAYLOR, JANSEN W
 29 N. BOULEVARD OF TH
 SARASOTA FL 34236

 TAYLOR, KAY C
 29 N. BOULEVARD OF TH
 SARASOTA FL 34236

 Company of Code
 11c. Registration/ Document Number

 SARASOTA FL 34236
 City, State & Zip Code

 Code
 11c. Registration/ Document Number

 SARASOTA FL 34236
 City, State & Zip Code

 Code
 11c. Registration/ Document Number

 SARASOTA FL 34236
 City, State & Zip Code

 Code
 11c. Registration/ Document Number

 Code

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. 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 of facts as if made under eath. I further certify that I am a General Partner of the limited partnership, receiver or trustee employered be execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

Typed or Printed Name of General Partner Stocker East.

JANSEN W. T

Daytime Telephone Number 141 - 388 - 16

CHZECO3 (6/97)