

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

LIMITED PARTNERSHIP  
ANNUAL REPORT  
1998



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

98 APR -3 AM 10:48

1. Name of Limited Partnership

1a. DOCUMENT #  
A97000000626

FACS RECORDS LIMITED PARTNERSHIP



Mailing Address

4501 ACLINE STREET  
TAMPA FL 33605

Principal Office Address

4501 ACLINE STREET  
TAMPA FL 33605

3. Date Formed or Registered

03/13/1997

5a. Capital Contributions as  
Shown on record

\$100.00

3a. Date of Last Report

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

\$100.00

4. State or Country of Formation

FL

6. FEI Number

91-1788195

☐ 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)

9. Name and Address of Current Registered Agent

INTRASTATE REGISTERED AGENT CORPORATION  
701 BRICKELL AVE., SUITE 3000  
MIAMI FL 33131

10. If changed, new Registered Agent/Office

Name John Newkamm

Street Address (P.O. Box Number Is Not Acceptable)

100 North Tampa Street

Suite, Apt. #, etc.

Suite 1900

City

Tampa

FL

Zip Code

33602

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)

DATE

3/25/98

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)

FACS RECORDS CENTER (FLORIDA)  
FACS SUBCO, INC.

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

4501 ACLINE STREET  
4501 ACLINE STREET

11b. City, State & Zip Code

TAMPA FL 33605  
TAMPA FL 33605

11c. Registration/  
Document Number

L36685  
P97000019331

100002481161  
-04/07/98-01050-0223  
\*\*\*\*441.25 \*\*\*\*14129

0244

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 By:

Stuart Hunter, Vice President

DATE

Typed or Printed Name of General Partner Signing Form

Stuart Hunter

Daytime Telephone Number

(813)248-4040

CRE003 (12/97)