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

LIMITED PARTNERSHIP ANNUAL REPORT 1998



THE FRANCES SMITH FAMILY LIMITED PARTNERSHIP

Waves H. Sm

Frances H. Smith

SIGNATURE \_

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

18. DOCUMENT # **A9700000662** 

## FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 MAR 17 AM 9: 18



DATE 6 March 1995

Marillana di di Jana	Disciplination Address			2 Data Formed or Registered	58 Cent	al Contributions as	
Malling Address  1132 PALMA SOLA BLVD.		Principal Office Address		3. Date Formed or Registered 03/17/1997		<b>58.</b> Capital Contributions as Shown on record.	
BRADENTON FL 34209	1132 Palma sola blvd Bradenton Fl <b>3420</b> 9			3a. Date of Last Report	\$50.00		
			1		5b. Amos	unt of Capital	
				4. State or Country of Formation	Contr to de	int of Capital ibutions in FLORIDA le:	
2. Mailing Address	28. Principal Office Add	2a, Principal Office Address		FL		\$50.00	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For		
City & State	City & State	City & State		65-0739796		Not Applicable	
Zip Country	Zip	Country		7. Certificate of Status Desired	X	<b>\$8.75</b> Additional Fee Required	
Country				8. Make check payable to: Dept. of \$150.00	State (See rev	erse side for fee informatio	
9. Name and Address of		10. If changed, new Registered Agent/Office					
SMITH, FRANCES H		Name	Name				
1132 PALMA SOLA BLVD.		Streel Address (P.O. Sulte, Apt. #, etc.		P.O. Box Number Is Not Acceptable)			
BRADENTON FL 34209				etc			
		City		<del></del>		Zip Code	
for the purpose of changing its registered	0.1051 and 620.192, Florida Statutes, the abo d office or registered agent, or both, in the Sta obligations of section 620.192, Florida Statute	ve-named limited partn te of Florida. Such cha				ida, submits this statemen	
for the purpose of changing its registered agent. I am familiar with, and accept the SIGNATURE (Registered Agent Accepting Appoin A GENERAL PARTNER 1	d office or registered agent, or both, in the Sta obligations of section 620.192, Florida Statute trnent)	ve-named limited partri te of Florida. Such cha s.	nge was autho	xized by its general partner(s). I here  DATE  VERSHIP OR OTHE	ne State of Flor eby accept the	ida, submits this statemen appointment of registered	
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agent. I am familiar with, and accept the SIGNATURE (Registered Agent Accepting Appoin A GENERAL PARTNER 1	d office or registered agent, or both, in the Sta obligations of section 620.192, Florida Statute  trnent)  THAT IS A CORPORATIO MUST BE REGISTERED  11a. (Do NOT Use Post C	ve-named limited partite of Florida. Such chais.  ON, LIMITED AND ACTIVE General Partner Office Box Numbers)  A BLVD.	PARTIVE WIT	DATE VERSHIP OR OTHE H THIS OFFICE. City, State & Zip Code  DENTON FL 34209  50002 -03/23 *****1	R BUSI 11c. A97 4655	NESS ENTITY  Registration/ Document Number  000000662	