

**FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT
TO 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 JAN -8 PM 4: 05



1. Name of Limited Partnership

**1a. DOCUMENT #
A97000000670**

PANTHERS BRHC LIMITED

Mailing Address

**ONE N.E. THIRD AVENUE, 2ND FLOOR
FORT LAUDERDALE FL 33301**

Principal Office Address

**ONE N.E. THIRD AVENUE, 2ND FLOOR
FORT LAUDERDALE FL 33301**

3. Date Formed or Registered

03/20/1997

**5a. Capital Contributions as
Shown on record**

\$120,903,746.00

3a. Date of Last Report

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

\$120,903,746.00

4. State or Country of Formation

FL

6. FEI Number

☐ 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

450 E. Las Olas Blvd.

2a. Principal Office Address

450 E. Las Olas Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Ft. Lauderdale, FL

City & State

Ft. Lauderdale, FL

Zip

Country

33301

USA

Zip

Country

33301

USA

9. Name and Address of Current Registered Agent

**AMERICAN INFORMATION SERVICES, INC.
ONE S.E. THIRD AVENUE, 27TH FLOOR
MIAMI FL 33131**

10. If changed, new Registered Agent/Office

Name

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

500002398755--0

Suite, Apt. #, etc.

-01713798--01087--012

City

*******541.25**

Zip Code

FL

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

**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)

**PANTHERS BRGP CORPORATION
BOCA RATON HOTEL AND CLUB LI**

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

**450 E. Las Olas Blvd.
~~ONE N.E. THIRD AVENUE~~
501 EAST CAMINO ROAD**

11b. City, State & Zip Code

**FORT LAUDERDALE FL 33
BOCA RATON FL 33432**

**11c. Registration/
Document Number**

**P97000025159
A14709**

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

WILLIAM M. PIERCE - Vice President

DATE 01/05/96

954-712-1300

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

CP2E003 (6/97)