

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. Monham
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

98 JAN 15 AM 9:16

1. Name of Limited Partnership

1a. DOCUMENT #
A97000000681

FLORIDA WETLANDS II, LTD.



01/22

Mailing Address

Principal Office Address

~~1800 NORTH DOUGLAS ROAD, SUITE 200~~
~~PEMBROKE PINES FL 33024~~

~~1800 NORTH DOUGLAS ROAD, SUITE 200~~
~~PEMBROKE PINES FL 33024~~

3. Date Formed or Registered

03/21/1997

5a. Capital Contributions as Shown on record.

\$29,700.00

3a. Date of Last Report

5b. Amount of Capital Contributions in FLORIDA to date

4. State or Country of Formation

FL

2. Mailing Address

805 E. BROWARD BLVD
Suite, Apt. #, etc.
SUITE 201

2a. Principal Office Address

805 E. BROWARD BLVD
Suite, Apt. #, etc.
SUITE 201

6. FEI Number

65-0736522

☐ Applied For
☐ Not Applicable

City & State

FT. LAUDERDALE FL
Zip Country
33301 BROWARD

City & State

FT. LAUDERDALE FL
Zip Country
33301 BROWARD

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

LAUTIN, LEW J
C/O FLORIDA WETLANDS MITIGATION, INC.
1800 NORTH DOUGLAS ROAD, SUITE 200
PEMBROKE PINES FL 33024

10. If changed, new Registered Agent/Office

Name

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

805 E. BROWARD BLVD
SUITE 201

Suite, Apt. #, etc.

City

FT. LAUDERDALE

FL

Zip Code

33301

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.

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******\$8.75 *****\$8.75**

SIGNATURE (Registered Agent Accepting Appointment)

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)

FLORIDA WETLANDS MITIGATION,

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

~~1800 NORTH DOUGLAS RD~~
805 E. BROWARD BLVD
SUITE 201

11b. City, State & Zip Code

~~PEMBROKE PINES FL 330~~
FT. LAUDERDALE
FLORIDA
33301

11c. Registration/Document Number

P97000025737

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******\$207.90 *****\$207.90**

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 660, Florida Statutes.

SIGNATURE

Typed or Printed Name of General Partner Signing Form

LAUTIN
LAUTIN

DATE

12/23/97

Daytime Telephone Number

954 4621707

CR2E003 (6/97)