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

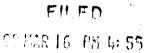
Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # **A97000001058**

BOLLINGER HOLDINGS, LTD.

as-th



DANETARY OF STATE



Mailing Address	Principal Office Address		3. Date Formed or Registered	58. Capital Contributions as Shown on record.	
4401 GULF SHORE BLVD., PH 8	4401 GULF SHORE BLVD., PH 8		05/12/1997	\$100.00	
North Naples Fl 38880 34103	NORTH NAPLES FL 3904 34103		38. Date of Last Report	4100,00	
				5b. Amount of Capital Contributions in FLORIDA	
			4. State or Country of Formation	to date:	
2. Mailing Address P.O. Box 22345	2a. Principal Office Address		FL	0	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For	
City & State	City & State		59-3452092	Not Applicable	
Louisville, KY 40252-			7. Certificate of Status Desired	\$8.75 Additional Fee Required	
Zip Country USA	Zip Country		8. Make check payable to: Dept. of State (See reverse side for fee Information)		
9. Name and Address of Current Registered Agent			10, If changed, new Registered Agent/Office		
BOLLINGER, PAUL PARKER SR.		Name			
4401 GULF SHORE BLVD., PH 8 NORTH NAPLES FL 33940		Street Address (P.O. Box Number is Not Acceptable)			
		Suite, Apt. #, etc.			
		City		Zip Code	
				FL	
for the purpose of changing its registered office agent. I am familiar with, and accept the obligat SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THA	ions of section 620.192, Florida Statutes.		DATE		
	ST BE REGISTERED AN				
11. Name(s) of General Partner(s)	11a. (Do NOT Use Post Office Bo	ai Partner ox Numbers) 111	City, State & Zip Code	11c. Registration/ Document Number	
BOLLINGER, PAUL PARKER SR.	4401 GULF SHORE BLVD.		NORTH NAPLES FL 39940 34	1103	
DATESON OF STREET POLICIONS				110 8	
PATRICIA SULLIVAN BOLLINGER	4401 GULF SHORE BLVD.		NORTH NAPLES FL 33940 34	1703	
			70 0002	4656574	
•		ļ	-03/23	4656574 3/9801124030	
			*****1	56.25 ****156.25	
Note: General partners MAY NO	T be changed on this form	n; an amendı	ment must be filed to ch	ange a general partner.	
10 Lefa haraby and the that the information counting with	to their fillians to controllerity of confehred and close as	at accolify for the account	ation eleted in Reation 110 07/2V/A). Elevide	Statutes, Linksee 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 exampl 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.

d or Printed Name of General Partner Signing Form PAUL P. BOLLINGER, SR.

Booking Walanton a North

502/425-1300