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
Sancin B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT #

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Maling Address Principal Office Accidence 1870 SCOTT ROAD 1870	•	A97000001	326	(1884) 1894 (1894) 1894 (1894) 1894 (1894) 1894 (1894) 1894 (1894) 1894 (1894) 1894		
1570 SOOT ROAD WINTER CARDEN FI. 34767 28. Principal Cities Additions Only 6 State Suite, April 4, etc. 29. Principal Cities Additions Only 6 State Output Only 6 State Output	PANTHER VIEW LIMITED PA	RTNERSHIP		1 100150 1818 1810 1910 9001 1		
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2. Mailing Address P. O. Box 690577 Suite, Apt 4. etc. City 6 State Country To Countr	· · · · · · · · · · · · · · · · · · ·					
2. Maling Address Sulle, Apt. #, etc. City & State Onland Little Register Country 3 y 78 7 Reference of Status Desired 7. Cerificate of Status Desired 8. Make check payable to: Dept. of State (See reference side for fee Information of Payable 1) 10. If chargod, now Registered Agent/Office Name 10. If chargod, now Registered Agent/Office 10. If chargod, no	9				5b. Amount of Capital Contributions in FLORIDA to date:	
City & State State Address of Current Registered Agent 10. If changed, now Registered AgentOffice Name Same Same V. Same Address of Current Registered AgentOffice Name Same Same V. Same Address of Current Registered AgentOffice Name Same Same V. Same Address of Current Registered AgentOffice Name Same Same V. Same Address of City Registered AgentOffice Name Same Same V. Same Address of City Registered AgentOffice Name Same Same V. Same Address of City Registered AgentOffice State Address of City Registered AgentOffice Salle, Apit #, etc. City WWW Learner Same I was Acceptated under the laws of the State of Florida. Submitted by its general partner(s). I hereby accept the disponent of secure to the State of Florida. Submitted by its general partner(s). I hereby accept the disponent of segister agent in a manufact with a disponent partner of the State of Florida. Submitted by its general partner(s). I hereby accept the disponent of segister agent in a manufact with a disponent partner of the State of Florida. Submitted by its general partner(s). I hereby accept the disponent of segister agent in a manufact with a disponent partner of the State of Florida. Submitted by its general partner of the State of Florida. Submitted by its general partner of the State of Florida. Submitted by its general partner of the State of Florida. Submitted by its general partner of the State of Florida. Submitted by its general partner of the State of Florida. Submitted by its general partner of the State of Florida. Submitted by its general partner of the State of Florida. Submitted by its general partner of the State of Florida. Submitted by its general partner of the State of Florida. Submitted by its general partner of the S	P.O. BOX 69057	2a. Principal Office Address ONE PIFIL RI	rson way	FL	700,000.00	
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9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office Name Na				7. Certificate of Status Desired \$8.75 Additional Fee Required		
HATCHER, STEPHEN B ESQ. 315 ROBINSON STREET, SUITE 600 ORLANDO FL\$2801 Total Pursuant to the provisions of sections 620 1051 and 620 192. Florida Statutes, the above-named imited partnership organized or registered under the laws of the State of Florida. Such change was surhorized by its general partner(s). I hereby accept the 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) 118. (DO NOT Use Post Office Box Numbers) PANTHER VIEW, INC. Note: General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner. Note: General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner.	32869-0577	34787		8. Make check payable to: Dept. of	State (See reverse side for fee Information)	
HATCHER, STEPHEN B ESQ. 315 ROBINSON STREET, SUITE 600 ORLANDO FL\$2801 Total Pursuant to the provisions of sections 620 1051 and 620 1052. Florida Statutes, the above-named finited partnership organized or registered under the laws of the State of Florida, such change was authorized by its general partner(s). I nereby accept the obligations of sections 620 1051 and 620 1051 in the State of Florida. Such change was authorized by its general partner(s). I nereby accept the propose of changing to registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I nereby accept the propose of changing the collegations of sections of sections of the provisions of the provisions of sections of the provisions of the provisi	9. Name and Address of Cur	rent Registered Agent	T	10. If changed, new Registere	d Agent/Office	
Street Address (P.O. Box Number is Not Acceptable) Date	HATCHER, STEPHEN B ESQ. 315 ROBINSON STREET, SUITE 600			Name Sames V. Sudoladar		
Total 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. Such ribidity of State of Florida. Such change was authorized by its general partner(s). I hereby accept this appointment of registered agent. I em familiar with, and accept the obligations of section 620.192. Florida Statutes egent. I em familiar with, and accept the obligations of section 620.192. Florida Statutes egent. I em familiar with, and accept the obligations of section 620.192. Florida Statutes egent. I em familiar with, and accept the obligations of section 620.192. Florida Statutes egent. I em familiar with, and accept the obligations of section 620.192. Florida Statutes egent. I em familiar with, and accept the obligations of section 620.192. Florida Statutes egent. I em familiar with, and accept the obligations of section 620.192. Florida Statutes egent. I em familiar with, and accept the obligations of section 620.192. Florida Statutes egent. I em familiar with, and accept the obligations of section 620.192. Florida Statutes egent. I em familiar with, and accept the obligations of section 620.192. Florida Statutes egent. I em familiar with, and accept the obligations of section 620.192. Florida Statutes egent. I em familiar with, and accept the obligations of section 620.192. Florida Statutes egent. I em familiar with, and accept the obligations of section 620.192. Florida Statutes egent. I em familiar with, and accept the days of the State of Florida Such changes and such creation of the State of Florida Such changes and such creation of the State of Florida Such changes and such creation of the State of Florida Such changes and such creation of the State of Florida Such changes and such creation of the State of Florida Such changes and such chan			Street Address (P.O. Box Number is Not Acceptable)			
108. 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 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 em familiar with, and accept the obligations of section 620.192, Florida Statutes. 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) 11a. (Do NOT Use Post Office Box Numbers) 11b. City, State & Zip Code 11c. Registratory Document Number PANTHER VIEW, INC. 16703 SCOTT ROAD ONE PHILL BUTSON WAS SIGNATURE (Registered Agent Accepting Appointment) WINTER GARDEN FL 3478 2. P97000053292 Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.	OUTVUDO LE 25001		Cin		Zio Code	
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ONG PHIL RIFSON WAY 5000025015455 -07/23/9801058002 *****536.00 *****536.00 Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner	11. Name(s) of General Partner(s)	11a. Address of Each General (Do NOT Use Post Office Bo	Partner x Numbers) 11b.	City, State & Zip Code	11c. Registration/ Document Number	
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	Note: General partners MAY NO	OT be changed on this form	; an amendme	ent must be filed to cha	inge a ge neral partner.	
12. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I refease 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 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 true empowered to execute this report as required by trappy 620. Florida Statutes. SIGNATURE	Corporations from any liability of non-compliance this annual report is true and accurate and that my empowered to execute this report as required by	with Section 119.07(3)(k) in the event that the int y signature shall have the same legal effects as thank 620 Florida Statutes	formation supplied is dee if made under oath. I furt	emed exempt from public access. I furth her certify that I am a General Partner of	er certify that the information indicated on the limited part nership, receiver or trustee	

SON Michelle Ricondulina Talanhona Number 407-656-2626