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 # **A9700001333**

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 APR -8 AM 9: 33

| | A9700000 | A9700001333 | | | |
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| BAKER MCGEE, LTD. | | | 1 100/01/1 10/01 10/01 10/01 10/01 | H BONN DONN DONN DONN HIDD HIDD HIDD HIND HIND HIND | |
| Mailing Address 201 CRANDON BLVD., APT. 1141 KEY BISCAYNE FL 33149 | CRANDON BLVD., APT. 1141 201 CRANDON BLVD., APT. 1141 | | 3. Date Formed or Registered 06/16/1997 3a. Date of Last Report | 5a. Capital Contributions as Shown on record. \$700,000.00 | |
| 2. Mailing Address | 28. Principal Office Address | | 4. State or Country of Formation | 5b. Amount of Capital Contributions in FLORIDA to date: | |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | Suite, Apt. #, etc. City & State | | Applied For Not Applicable | |
| City & State Zip Country | Zip | | | \$8.75 Additional Fee Required . of State (See reverse side for fee information) | |
| 9. Name and Address of Current Registered Agent CURRIER, KENNETH 201 CRANDON BLVD., APT. 1141 KEY BISCAYNE FL 33149 | | 10. If changed, new Registered Agent/Office Name | | | |
| | | Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City Tip Code | | | |
| for the purpose of changing its regi agent. I am familiar with, and accepting SIGNATURE (Registered Agent Accepting A | | torida. Such chan | ge was authorized by its general partner(s). I | hereby accept the appointment of registered | |
| 11. Name(s) of General Partner(s) | R THAT IS A CORPORATION, MUST BE REGISTERED AI 11a. (IDO NOT Use Post Office of the control | ND ACTIV | E WITH THIS OFFICE. 11b. City, State & Zip Code | 11c. Registration/ | |
| PALMER ANN, INC. | | 201 CRANDON BLVD., AP | | F97000003135 (26/71) 2003 | |
| | | | | 24874153 8 14/8801010019 ×141.25 ****141.25 | |
| • | | | | | |
| Noțe: General partners l | MAY NOT be changed on this for | m; an ame | ndment must be filed to c | hange a general partner. | |
| Corporations from an Viability of non- | a supplied with this filing is volunterily furnished and does compliance with Section 119 07(3)(k) in the event that the e and that my signature shall have the same legal effects a required by chapter 620, Florida Statutes. | information suppli | ed is deemed exempt from public access. I for | urther certify that the information indicated on | |
| Typed or Printed Name of General Payner Si | gning Form KENNETTE P. CUN | rién | Daytime Telephone Number | 305-569-1200 | |