## 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

1. Name of Limited Partnership

FFS PARTNERS, LTD.

1a. DOCUMENT # **A9700001506** 

FILED 98 JAN -2 PM 3: 20



,												
Mailing Address	ress Principal Office Address			3, Date Formed or Registered     5a. Capital Contributions as Shown on record.		d Contributions as						
2300 GLADES RD., STE. 100E 2300 GLADES RD., STE. 100E		)OE	07/09/1997		<b>A7</b> F00 00							
BOCA RATON FL 33431 BOCA RATON FL 33431			Ī	3a. Date of Last Report	\$7,500.00							
					5b. Amou	nt of Capital bulions in FLORIDA						
				4. State or Country of Formation	to dal	D.						
2. Malling Address	2a. Principal Office Address			FL		0.00						
Sulte, Apt. #, etc.	Suite, Apt. #, etc.			€ EUNimbor								
						Applied For Not Applicable						
City & State	City & State		-	7. Certificate of Status Desired		\$8.75 Additional						
Zip Country	Zip Country			Foo Required		Fee Required						
				8. Make check payable to: Dept. of	State (See rev	erse side for fee information)						
9. Name and Address of C	Surrent Registered Agent			10. If changed, new Registere	ed Agent/Office							
<b>9.</b> Name 210 Approx 51.5	Name											
FFS EQUITY CORP.  2300 GLADES RD., STE. 100E  BOCA RATON FL 33431		Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, etc.										
								City	City			Zip Code
							10a. Pursuant to the provisions of sections 620.10 for the purpose of changing its registered of agent. I am familiar with, and accept the obli	lice or registered agent, or both, in the Sta	te of Florida. Such char	ership organ nge was auth	'zed or registered under the laws of to lorized by its general partner(s). I he	FL the State of Flori reby accept the
SIGNATURE (Registered Agent Accepting Appointme				DATE								
A GENERAL PARTNER TH	IAT IS A CORPORATION	ON, LIMITED O AND ACTIV	PARTI	NERSHIP OR OTHE H THIS OFFICE.	R BUSII	NESS ENTITY						
11. Name(s) of General Partner(s)	11a. Address of Each Gonoral Parlner (Do NOT Use Post Office Box Numbers)		11b.	City, State & Zip Code	11c.	Registration/ Decument Number						
FFS EQUITY CORP. 2300 GLADES RD., STE.		STE.	BOCA RATON FL 33431		P97000059462							

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 eath. 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 A

Typed or Printed Name of Gororal Partner Signing Form

William R Greenfield

DATE 12/31/97
Daytinio Telephone Number (561)392-6662

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