

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

FILED

97 SEP 22 AM 10: 01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



1. Name of Limited Partnership

1a. DOCUMENT #
A97000001573

MAJOR LEAGUE WATERS, LTD.

98-AR
CM

Mailing Address

**1405 GREEN COVE ROAD
WINTER PARK FL 32789**

Principal Office Address

**1405 GREEN COVE ROAD
WINTER PARK FL 32789**

3. Date Formed or Registered

07/18/1997

5a. Capital Contributions as Shown on record.

\$10,001.00

3a. Date of Last Report

5b. Amount of Capital Contributions in FLORIDA to date:

4. State or Country of Formation

FL

6. FEI Number

☒ Applied For
☐ Not Applicable

7. Certificate of Status Desired

☐ **\$8.75** Additional Fee Required

8. Make check payable to: Dept. of State (See reverse side for fee information)

2. Mailing Address

PO Box 941330

Suite, Apt. #, etc.

City & State

Maitland FL

Zip

32794-1330 USA

2a. Principal Office Address

130 N Cypress Way

Suite, Apt. #, etc.

City & State

Casselberry FL

Zip

32707 USA

9. Name and Address of Current Registered Agent

**FARMER, RICHARD A
1405 GREEN COVE ROAD
WINTER PARK FL 32789**

10. If changed, new Registered Agent/Office

Name

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

Suite, Apt. #, etc.

City

FL

Zip Code

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.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

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)

MAJOR LEAGUE WATERS, INC.

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

1405 GREEN COVE ROAD

11b. City, State & Zip Code

WINTER PARK FL 32789

11c. Registration/Document Number

P96000015125

**4000002302634--3
-09/24/97--01095--003
****173.75 ****173.75**

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 620, Florida Statutes.

SIGNATURE

DATE

Typed or Printed Name of General Partner Signing Form

Richard Farmer

Daytime Telephone Number

407-767-0700

CR2E003 (6/97)