FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP **ANNUAL REPORT** 1999

SIGNATURE

Typed or Printed Name of General Partner Signing Form





FLORIDA DEPARTMENT OF STATE

Sandr& S. . Marcham

Secretary of State DIVISION OF CORPORATIONS SECRETARY OF STATE DIVISION OF CORPORATIONS

98 DEC 14	PM 2: 17	

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1. Name of Limited Partnership	1a. DOCUM A970000 0	MENT # 1858	<u></u>		•	- · · · · · · · · · · · · · · · · · · ·	
ATRANDO LIMITED PARTNI	ERSHIP			0012/18			
Mailing Address	Principal Office Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as		
C/O DRUCKER & FALK. LLC 7200 STONEHENGE DRIVE. SUITE 211 RALEIGH NC 27613	C/O DRUCKER & FALK, LLC 7200 STONEHENGE DRIVE, SU RALEIGH NC 27613	C/O DRUCKER & FALK. LLC 7200 STONEHENGE DRIVE. SUITE 211		08/27/1997 3a. Date of Last Report 04/08/1998 4. State or Country of Formation	\$1,100,000.00 5b. Amount of Capital Contributions in FLORIDA to date:		
2. Mailing Address	2a. Principal Office Address	2a. Principal Office Address		FL			
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For		
City & State	City & State	City & State		AP-PLIED-FOR 59-34-CL000 Not Applicable			
Zip Country	Zip	Zip Country		7. Certificate of Status Desired \$8.75 Additional Fee Required			
				8. Make check payable to: Dept. of S	tate (See reve	rse side for tee information)	
9. Name and Address of Co	rrent Registered Agent			10. If changed, new Registered	Agent/Office		
HUNTER, DANIEL M		Street Add	ress (P.O. Bo	x Number is Not Acceptable)			
227 WEST PARK AVENUE WINTER PARK FL 32789		Suite, Apt.	Suite, Apt. #, etc.				
		City		<u> </u>	FL	Zip Code	
agent. I am familiar with, and accept the oblig SIGNATURE (Registered Agent Accepting Appointment A GENERAL PARTNER TH	e or registered agent, or both, in the State of Flations of section 620.192, Florida Statutes.	LIMITEC	PART	ntzed by its general partner(s). I hereby DATE	State of Floric accept the ap	pointment of registered	
11. Name(s) of General Partner(s)	UST BE REGISTERED A	·	11b.	City, State & Zip Code	11c.	Registration/	
ATRANDO, INC.		11a. (Do NOT Use Post Office Box Numbers) 7200 STONEHENGE DRIVE		RALEIGH NC 27613		P97000074613	
			in the second se	3000027 -12/22/ ****52	7 1 5 17 7980: 28,25	7038 1033005 ****526.25	
Note: General partners MAY N	OT be changed on this for	rm; an am	endme	nt must be filed to cha	nge a g	eneral partner.	
12. I do hereby certify that the information supplied of Corporations from any liability of non-compliance this annual report is true and accurate and that re-	with Section 119.07(3)(k) in the event that the	information supp	died is deeme	ed exempt from public access. I further o	certify that the	information indicated on	

Daytime Telephone Number_