

FILE ON OR BEFORE APRIL 7, 1999 TO AVOID  
REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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FILED  
99 JUN -7 PM 12:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



1. Name of Limited Partnership  WINDSOR FAMILY MANAGEMENT, LTD.	1a. DOCUMENT # A97000002310
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Mailing Address 106 SE 17TH AVENUE CAPE CORAL FL 33990	Principal Office Address 106 SE 17TH AVENUE CAPE CORAL FL 33990	3. Date Formed or Registered 10/23/1997	5a. Capital Contributions as Shown on record \$100.00
2. Mailing Address Windsor Court 5875 NW 35th Way Suite, Apt. #, etc. 5875 WINDSOR COURT	2a. Principal Office Address Windsor Court 5875 NW 35th Way Suite, Apt. #, etc. 5875 WINDSOR COURT	3a. Date of Last Report 12/26/1997	5b. Amount of Capital Contributions in FLORIDA to date:
City & State Boca Raton FL	City & State Boca Raton FL	4. State or Country of Formation FL	6. FEI Number 65-0790899 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip 33496	Country USA	7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	8. Make check payable to Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent WINDSOR FAMILY MANAGEMENT CORP. 106 SE 17TH AVENUE CAPE CORAL FL 33990	10. If changed, new Registered Agent/Office Name Windsor Family Management Corp. Street Address (P.O. Box Number Is Not Acceptable) 5875 WINDSOR COURT Suite, Apt. #, etc. City Boca Raton FL Zip Code 33496
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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

4/6/99

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) WINDSOR FAMILY MANAGEMENT CO	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 106 SE 17TH AVENUE 5875 WINDSOR COURT	11b. City, State & Zip Code CAPE CORAL FL 33990 BOCA RATON FL 33496 100002904731--2 -06/15/99--01037--001 ****29.25 ****641.25	11c. Registration/ Document Number P97000088817
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REINSTATEMENT

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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

4/6/99

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

CR2E003 (12/98)