

**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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 APR -9 AM 11:00

1. Name of Limited Partnership

1a. **DOCUMENT #
A97000002338**

EDWARD J. WOERNER FAMILY LIMITED PARTNERSHIP



Mailing Address

505 S. FLAGLER DRIVE, STE. 606
WEST PALM BEACH FL 33401

Principal Office Address

505 S. FLAGLER DRIVE, STE. 606
WEST PALM BEACH FL 33401

3. Date Formed or Registered

10/27/1997

5a. Capital Contributions as
Shown on record

\$1,800,000.00

3a. Date of Last Report

12/31/1997

5b. Amount of Capital
Contributions in FLORIDA
to date

4. State or Country of Formation

FL

6. FEI Number

65-0800148

Applied For
 Not Applicable

7. Certificate of Status Desired

\$8.75 Additional
Fee Required

8. Maximum payable to Dept of State (See reverse side for fee information)
\$526.25

2. Mailing Address

805-A N. McKenzie St.
Suite, Apt. #, etc.

2a. Principal Office Address

805-A N. McKenzie St.
Suite, Apt. #, etc.

City & State

Foley, AL

City & State

Foley, AL

Zip Country

36535 Baldwin

Zip Country

36535 Baldwin

9. Name and Address of Current Registered Agent

KPL SERVICES, INC.
390 N. ORANGE AVENUE, STE. 600
ORLANDO FL 32801

10. If changed, new Registered Agent/Office

Name **Stephen E. Scapecchi**
Street Address (P.O. Box Number is Not Acceptable)
33 Peel Way 00002841227-1
Suite, Apt. #, etc. **04/15/99-01120-023**
City **Pensacola** Zip Code **FL 32533**
****526.25

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)

Stephen E. Scapecchi

DATE **4/7/99**

**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)

WOERNER SENIOR (E.J.), INC.

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

~~505 S. FLAGLER DRIVE,~~
805-A North McKenzie

11b. City, State & Zip Code

**WEST PALM BEACH FL 33-
Foley, AL 36535**

11c. Registration/
Document Number

P97000106105

Handwritten initials/signature

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

Edward J. Woerner

DATE **4/7/99**

Typed or Printed Name of General Partner Signing Form

Edward J. Woerner

Daytime Telephone Number

334/943/3770

CR2E003 (12/98)