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

LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT# **A97000002372** 

## FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

|  |  |   |                  |   | , i comps   |  |
|--|--|---|------------------|---|---|--|
| SANFORD EQUIPMENT FAMILY   | LIMITED PARTNERSHIP  |   |                  |   |   |  |
| Mailing Address  4477 CIACONA OCDEE ROAD ORLANDO FL 32810  | Principal Office Address  4477 CIACONA OCDEE ROAD ORLANDO FL 32810                         |   |                  | 10/28/1997  a. Date of Last Report                              | 5a. Capital Contributions as Shown on record.                               |  |
| 2. Mailing Address   | 2a. Principal Office Address   |   | 4                | 04/08/1998  State or Country of Formation  FL                   | 5b. Amount of Capital<br>Contributions in FLORIDA<br>to date:               |  |
| Suite, Apt. #, etc.  City & State  | Suite, Apt. #, etc.  City & State  |   | 6                | 6. FEI Number 59-3509993 Applied For AP-PHED FOR Not Applicable |   |  |
| Zip Country  |  |   |                  |   | \$8.75 Additional Fee Required  State (See reverse side for fee Information |  |
| 9. Name and Address of Current Registered Agent SANFORD, BRIAN J 2110 GENOVA DRIVE OVIEDO FL 32765-7226  |  | Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc.  City  Tip Code |                  |   |   |  |
| 10a. Pursuant to the provisions of sections 620, 1051 and 6 for the purpose of changing its registered office or regagent. I am familiar with, and accept the obligations of SIGNATURE (Registered Agent Accepting Appointment)  A GENERAL PARTNER THAT I MUST | istered agent, or both, in the State of Florid<br>f section 620.192, Florida Statutes.     | la. Such chang  | ge was authorize | ed by its general partner(s), I hereb                           | y accept the appointment of registered                                      |  |
| 11. Name(s) of General Partner(s)  | 11a. Address of Each General   | Partner   | 11b.             | City, State & Zip Code  | 11c. Registration/<br>Document Number                                       |  |
| PRESTIGE FENCE, INC.   | 4477 CIACONA OCDEE R   | 0   |                  |   | H77101  |  |
|  |  |   |                  | -12/18  | 7164245<br>3/9801088015<br>41.25 ****141.25                                 |  |
| Note: General partners MAY NOT   | be changed on this form  | ; an am   | endment          | must be filed to ch   | ange a general partner.   |  |
| 12. I do hereby certify that the information supplied with this<br>Corporations from any liability of non-compliance with S<br>this annual report is true and accurate and that my signa<br>empowered to execute this report as required by chapte             | ection 119.07(3)(k) in the event that the infature shall have the same legal effects as if | rmation suppl   | lied is deemed e | exempt from public access. I further                            | r certify that the information indicated on                                 |  |
| SIGNATURE Buan   | Ranford  |   |                  | DATE  | 12-3-98   |  |
| Typed or Printed Name of General Partner Signing Form  | SRIAN J SAN  | SFORE   | 2                | Daytime Telephone Number  | 107 291-1101  |  |