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

LIMITED PARTNERSHIP ANNUAL REPORT





FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # A9700002580

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 DEC 22 PM 12: 21

12/17/98

Daytime Telephone Number (941) 495-9401

	7.01.00002500						
TERRY41 LIMITED PARTNERSHI							
Mailing Address	Principal Office Address		3. Date F	ormed or Registered	5a. Capital Contributions as Shown on record.		
25161 RIDGE OAK DRIVE BONITA SPRINGS FL 34134	25161 RIDGE OAK DRIVE BONITA SPRINGS FL 34134			1/1997 of Last Report	\$1,500.00		
				2/1998	5b. Amount of Capital Contributions in FLORIDA to date:		
2. Mailing Address	2a. Principal Office Address		FL	r Country of Formation	\$900,000.00		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI N	mber	Applied For		
City & State	City & State			796776	Not Applicable		
Zip Country	p Country Zip Country			7. Certificate of Status Desired \$8.75 Addit Fee Require			
			8. Make d	heck payable to: Dept. of S	tate (See rev	erse side for fee information)	
9. Name and Address of Current Registered Agent		10.	10. If changed, new Registered Agent/Office				
1		Name	Name				
CRONIN, DENNIS P ESQ		Street Address (P.O. Box Number Is Not Acceptable)					
BOND, SCHOENECK & KING, P.A.TE 107 1167 THIRD STREET SOUTH, STE. 107		Suite, Apt #, etc. 10/00/02 739231 4					
NAPLES FL 34102-7098		-01/13/9901027004 					
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)	11a. Address of Each General (Do NOT Use Post Office Boy	Partner 11	lb. City, S	tate & Zip Code	11c.	Registration/ Document Number	
KOSUL, INC.	25161 RIDGE OAK DRIVE		BONITA SPRINGS FL 34134		CRZE003 (8/98)		
Note: General partners MAY NOT be 12. I do hereby certify that the information supplied with this fill Corporations from any liability of non-compliance with Sec this annual report is true and accurate agait that my signature	ing is voluntarily furnished and does not c	qualify for the exem	ption stated in Section of the computer of the	ion 119.07(3)(k), Florida Sta om public access. I further c	tutes. I relea	se the Division of a Information indicated on	

Romp, as President