

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
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FILED
99 APR -7 AM 11:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



1. Name of Limited Partnership LINDNER FAMILY LIMITED PARTNERSHIP, LTD.	1a. DOCUMENT # A97000002653
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Mailing Address 701 E. CAMINO REAL BOCA RATON FL 33432	Principal Office Address 701 E. CAMINO REAL BOCA RATON FL 33432
2. Mailing Address Suite, Apt. #, etc. City & State Zip Country	2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country

3. Date Formed or Registered 12/05/1997	5a. Capital Contributions as Shown on record \$3,040,390.00
3a. Date of Last Report 01/20/1998	5b. Amount of Capital Contributions in FLORIDA to date:
4. State or Country of Formation FL	6. FEI Number AP-PLIED FOR
7. Certificate of Status Desired	☐ Applied For ☐ Not Applicable
8. Make check payable to Dept. of State (See reverse side for fee information)	\$8.75 Additional Fee Required

9. Name and Address of Current Registered Agent LINDNER, CARL W 701 E. CAMINO REAL BOCA RATON FL 33432	10. If changed, new Registered Agent/Office Name <i>BRADY & BRADY PA</i> Street Address (P.O. Box Number Is Not Acceptable) <i>370 W. Camino Gardens Blvd.</i> Suite, Apt. #, etc. <i>Third Floor</i> City <i>Boca Raton</i> FL Zip Code <i>33432</i>
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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) *Frank R. Brady* DATE *12-8-98*

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) LINDNER, CARL W COLE, STEPHANIE	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 701 E. CAMINO REAL 3105 W. SCENIC DRIVE	11b. City, State & Zip Code BOCA RATON FL 33432 DANIELVILLE PA 18038	11c. Registration/Document Number 4000002726894 - - 1 -12/30/98 - -01075--024 ***\$22.50 ***\$35.00
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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 *Stephanie Cole* DATE *12/12/98*
 Typed or Printed Name of General Partner Signing Form *Stephanie Cole* Daytime Telephone Number *610 837 6280*

CR2E003 (8/98)