

FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT
TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 98 JAN -5 PM 12:18	
1. Name of Limited Partnership Horse's Head Limited Partnership 3300 PGA Blvd., Suite #805 Palm Beach Gardens, FL 33410		1a. DOCUMENT # A97000002747		3. Date Formed or Registered 12-18-97		5a. Capital Contributions as Shown on Record \$ 10,000.00	
2. Mailing Address 3300 PGA Blvd, Ste#805 Palm Beach Gardens, FL 33410		2a. Principal Office Address 3300 PGA Blvd, Ste#805 Palm Beach Gardens, FL 33410		3a. Date of Last Report		5b. Amount of Capital Contributions in FLORIDA to Date	
4. State or Country of Formation FL		6. FCI Number ☒ Applied for ☐ Not Applicable		7. Certificate of Status Filled ☐ \$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 Helen E. Stone 3300 PGA Blvd., Suite #805 Palm Beach Gardens, FL 33410		10. If changed, new Registered Agent/Office Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ Suite, Apt. #, etc. _____ City _____ State FL Zip Code _____					
10a. I, the undersigned, being a partner or officer of the above-named limited partnership, do hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that the partnership is duly organized under the laws of the State of Florida. I further certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that the partnership is duly organized under the laws of the State of Florida. I further certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that the partnership is duly organized under the laws of the State of Florida.							
SIGNATURE (Registered Agent Accepting Appointment) <i>Helen E. Stone</i> DATE <i>Dec 31-97</i>							
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) Horse's Head, Inc.		11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 3300 PGA Blvd, Suite #805		11b. City, State & Zip Code Palm Beach Gardens, Florida 33410		11c. Registration/Document Number A97000106744 200002412582--3 -01/27/98--01013--006 ****173.75 ****173.75	
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(4)(a), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(4)(a) 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 reported or trustee empowered to execute this statement as required by Chapter 620, Florida Statutes.							
SIGNATURE <i>Helen E. Stone</i> DATE <i>Dec 31-97</i>							
Typed or Printed Name of General Partner Signing Form Helen E. Stone (Typed Telephone Number) (561) 626-9711							