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

FILED W3/2 LIMITED PARTNERSHIP FLORIDA DEPARTMENT OF STATE Sandra B. Mortham **ANNUAL REPORT** Secretary of State 99 FEB 26 PM 2: 02 1999 DIVISION OF CORPORATIONS TALL ALIVE THE RIBA DOCUMENT # 1. Name of Limited Partnership A97000002867 JAMES AND TERESA TAYLOR FAMILY LIMITED PARTNERSHIP 3. Date Formed or Registered 5a. Capital Contributions as Shown on record. Malling Address Principal Office Address 12/29/1997 30 CYPRESS LANE 30 CYPRESS LANE \$350,000.00 WINTER PARK FL 32789 WINTER PARK FL 32789 3a. Date of Last Report 01/09/1998 5b. Amount of Capital Contributions In FLORIDA to date: 4. State or Country of Formation 2. Mailing Address 2a. Principal Office Address 6. FEI Number 59-3484077 AP-PLIED FOR Sulte, Apt. #, etc. Suite, Apt. #, etc. Applied For Not Applicable City & State City & State 7. Certificate of Status Desired \$8.75 Additional Fee Required Zip Country Country 8. Make check payable to Dept of State See goverse side for fee information) 9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office TAYLOR, JAMES D Street Address (P.O. Box Number Is Not Acceptable) 30 CYPRESS LANE WINTER PARK FL 32789 Suite, Apt #, etc City Zip Code 10a, Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the taws of the State of Fiorida, 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. Address of Each General Partner Registration/ Document Number 11. Name(s) of General Partner(s) City, State & Zip Code (Do NOT Use Post Office Box Numbers) TAYLOR, JAMES D 30 CYPRESS LANE WINTER PARK FL 32789 TAYLOR, TERESA L 30 CYPRESS LANE WINTER PARK FL 32789

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Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

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
Processions 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
his annual report is true and accurate and that my signature shall have the same legal effects as if made under eath. I further certify that I am a General Partner of the limited partnership, receiver or truster
empowered to execute this report as required by chapter 620, Florida Statutes
,

SIGNATURE

Typed or Printed Name of General Partner Signing Form

Partner

DATE 12/30/98

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