

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. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 JAN 27 AM 11:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name of Limited Partnership

**Giardina Family
Limited Partnership**

1a. DOCUMENT #

A97000002930

Mailing Address

**1033 Boca Cove Lane
Highland Beach, FL 33487**

Principal Office Address

**1033 Boca Cove Lane
Highland Beach, FL 33487**

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

12/31/97

3a. Date of Last Report

N/A

4. State or Country of Formation

Florida

5a. Capital Contributions as Shown on record

\$400,000.00

5b. Amount of Capital Contributions in FLORIDA to date

\$400,000.00

6. FEI Number

☒ Applied For
☐ Not Applicable

7. Certificate of Status Desired

☒ **\$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

**Salvatore V. Giardina
1033 Boca Cove Lane
Highland Beach, FL 33487**

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc.

City

FL

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 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)

Giardina Properties, Inc.

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

1033 Boca Cove Lane

11b. City, State & Zip Code

**Highland Beach, FL
33487**

11c. Registration/
Document Number

P97000043687

**500002416545--3
-01/29/98--01109--009
****535.00 ****535.00**

437.50 88.75 8.75

dec

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

Salvatore V. Giardina

DATE

1-12-98

Typed or Printed Name of General Partner Signing Form **Salvatore V. Giardina**

Daytime Telephone Number **(561) 997-5700**

CR2E003 (6/97)