

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. Northam

Secretary of State

DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT #
A98000000022

The Fawcett Family Limited Partnership IV, Ltd.

FILED
MAR 30 PM 12:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Mailing Address

11780 U.S. Highway One
Suite 300
North Palm Beach, FL 33408

Principal Office Address

11780 U.S. Highway One
Suite 300
North Palm Beach, FL 33408

2. Mailing Address

2a. Principal Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip Country

Zip Country

3. Date Formed or Registered

12-26-97

3a. Date of Last Report

N/A

4. State or Country of Formation

Florida

5a. Capital Contributions as
Shown on record.

\$500,000

5b. Amount of Capital
Contributions in FLORIDA
to date:

\$500,000

6. FEI Number
65-0803635

☒ 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

FHS Corporate Services, Inc.
11780 U.S. Highway One, Suite 300
North Palm Beach, FL 33408

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.**

1. Name(s) of General Partner(s)

Fawcett, Inc.

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

11780 U.S. Highway One
Suite 300

11b. City, State & Zip Code

North Palm Beach, FL
33408

11c. Registration/
Document Number

P97000107276

3000002417359--4
-01/22/98--01112--003
1750.00 *170.25

3000002417359--4
-04/08/98--01076--009
****355.00 ****355.00

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

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.

Fawcett, Inc., General Partner

SIGNATURE

Vivian P. Fawcett
By: Vivian P. Fawcett, President

DATE 1-21-98

Printed Name of General Partner Signing Form

Daytime Telephone Number

(561) 627-8100