

FILE ON OR BEFORE APRIL 7, 1999 TO AVOID
REVOCATION AND \$500 PENALTY FEE

FILED

99 FEB 15 PM 2:40

LIMITED PARTNERSHIP
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT #
A98000000408

OETTER ENTERPRISES, LTD.



Mailing Address

4220 NORTHWEST 16TH AVENUE-
GAINESVILLE FL 32604-

Principal Office Address

4220 NORTHWEST 16TH AVENUE
GAINESVILLE FL 32604-

3. Date Formed or Registered

02/12/1998

5a. Capital Contributions as
Shown on record

\$4,100,000.00

3a. Date of Last Report

5b. Amount of Capital
Contributions in FLORIDA
to date

\$4,100,000.00

4. State or Country of Formation

FL

6. FEI Number

59-3492593

☐ 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)

2. Mailing Address

PO Box 13955

Suite, Apt. #, etc.

2a. Principal Office Address

4130 NW 16 Blvd

Suite, Apt. #, etc.

City & State

Gainesville FL

City & State

Gainesville FL

Zip

Country

32604

US

Zip

32605

Country

US

9. Name and Address of Current Registered Agent

OETTER, ROBERT L

-4220 NORTHWEST 16TH AVENUE-

-GAINESVILLE FL 32604-

10. If changed, new Registered Agent/Office

Name

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

4130 NW 16 Blvd

Suite, Apt. #, etc.

City

Gainesville

FL

Zip Code

32605

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 Feb. 8, 1999

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)

OETTER, ROBERT L

OETTER, W. PETER

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

4220 NORTHWEST 16TH A

4130 NW 16 Blvd.

4220 NORTHWEST 16TH A

4130 NW 16 Blvd.

11b. City, State & Zip Code

-GAINESVILLE FL 32604

Gainesville FL 32605

-GAINESVILLE FL 32604

Gainesville FL 32605

11c. Registration/
Document Number

200002792682-1
-03/02/99-01084-006
****585.00 ****535.00

(dec. (q.w))

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

Robert L. Oetter

DATE Feb. 8, 1999
(352) 375-2129

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

CR2E003 (12/98)