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

LIMITED PARTNERSHIP ANNUAL REPORT 1999

C & R MARKETING CONSULTANTS, LTD.

Country



Zip

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

Zip

a. DOCUMENT # **A98000000656**

98 OCT 19 AHII: 58

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Mailing Address	Principal Office Address	3. Date Formed or Registered	5a. Capital Contributions as Shown on record.
218 BLAZER CT.	218 BLAZER CT.	03/02/1998	\$0.00
MELBOURNE BEACH FL 32951	MELBOURNE BEACH FL 32951	3a. Date of Last Report	\$0.00
		N.A	5b. Amount of Capital
		4. State or Country of Formation	 Contributions in FLORIDA to date:
2. Mailing Address	2a. Principal Office Address	FL	\$ 0.00
Suite, Apt. #, etc.	Suite, Apt. #, etc.	6. FEI Number	Applied For
City & State	City & State	59-353 514la	Not Applicable
ony a batto	ony a same	7. Certificate of Status Desired	\$8.75 Additional
Zin Country	Zin Country		Fee Required

9. Name and Address of Current Registered Agent	10. If changed, new Registered Agent/Office		
HANS, RICHARD P	Name		
218 BLAZER CT.	Street Address (P.O. Box Number Is Not Acceptable)		
MELBOURNE BEACH FL 32951	Suite, Apt. #, etc.		
	City Zip Code		

Country

10a. Pursuant to the provisions of sections 620.1051 and 620.195, 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)

8. Make check payable to: Dept. of State (See reverse side for fee information)

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY

WIUST DE REGISTERED AND ACTIVE WITH THIS OFFICE.						
11. Name(s) of General Partner(s)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number			
HANS, RICHARD P	218 BLAZER CT.	MELBOURNE BCH. FL 329				
MARION, CHESTER E	4 STARLIGHT RD.	MILTON OAK RIDGE NJ 0				
u		8000026 -18/2179 ****15	69368—1 83-01067—014 0.00 ****150.00			
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Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

122. 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, Flori∉a Statutes.

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Typed or Printed Name of General	Partner Signing Form	CN	11-05 K	<u> </u>