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

LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT #

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	A9800000941		LIBIOTA A MANAGARA A M	
ADVANCED COASTAL CONST	RUCTION, LIMITED			#8/11 16/17 66/17 #8/17 16/17 16/17 \$10/17 \$10/17 \$10/17 \$10/17 \$10/17 \$10/17 \$10/17 \$10/17 \$10/17 \$10/17 \$10/
Mailing Address 155 CRYSTAL BEACH DRIVE, SUITE 101 DESTIN FL 32541	Principal Office Address 155 CRYSTAL BEACH DRIVE, SUITE 101 DESTIN FL 32541		3. Date Formed or Registered 04/16/1998 3a. Date of Last Report	5a. Capital Contributions as Shown on record \$100,000.00- 5b. Amount of Capital Contributions in FLORIDA.
2. Mailing Address 9105 HWY 98 WEST Suite Apt. #, etc. SUITE 200 City & State DESTIN FLURIDA Zip 32541 Zip 32541 USA	23 Principal Office Address 9705 HW 198 WES SUITE 200 City & State DESTIN FURIDA 21932541		4. State or Country of Formation FL 6. FEI Number 59 - 3505538 7. Certificate of Status Desired 8. Make check payable to Dept of	to date 40,000,00 Applied For Not Applicable \$8.75 Additional Fee Required State (See reverse side for fee information)
9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office				
PETERMANN, RICHARD P P.A. SMITH GRIMSLEY BAUMAN PINKERTON PETERMANN 25 WALTER MARTIN ROAD FORT WALTON BEACH FL 32548 10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-na for the purpose of changing its registered office or registered agent, or both, in the State of Fi agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.		ile, Apt #, etc y ed partnership org	Box Number Is Not Acceptable) anized or registered under the laws of the uthorized by its general partner(s). I hereby	FL Zip Code State of Florida, submits this statement y accept the appointment of registered
SIGNATURE (Registered Agent Accepting Appointment)			DATE	
A GENERAL PARTNER THAT I	S A CORPORATION, LIM BE REGISTERED AND A	ITED PAR ACTIVE W	RTNERSHIP OR OTHE /ITH THIS OFFICE.	R BUSINESS ENTITY
11. Name(s) of General Partner(s)	11a. (Do NOT Use Post Office Box Number			11c. Registration/ Document Number
ADVANCED COASTAL CONSTRUCTIO	155 CRYSTAL BEACH DRI		DESTIN FL 32541	P97000076434 ·
· :				89325412 779901089016 518.75 ****368.75
at a second				

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 Trelease the Division of Corporations from any liability of non-compliance with Section 119.07(3)ky 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 that have the game 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 ch

SIGNATURE

Daytime Telephone Number 850-650-5511