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

LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDATE PARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED 99 FEB 11 AMII: 26

				9911	RII M	411+56
1. Name of Limited Partnership	1a. DOCUMENT # A9800000943					STATE FLORIDA
BOPP ENTERPRISES, LTD.			:			
Mailing Address	Principal Office Address			3. Date Formed or Registered	5a. Capit	al Contributions as
225 IMPERIAL BOULEVARD LAKELAND FL 33803	225 IMPERIAL BOULEVARD LAKELAND FL 33803			04/16/1998 3a. Date of Last Report	\$10,000,000.00	
			-	4. State or Country of Formation	5D. Amor Controde	unt of Capital ributions in FLORIDA te:
2. Malling Address	2a. Principal Office Address			FL FL		
Sulte, Apt. #, etc.	Suite, Apt. #, etc.			6. FEI Number 59-3504900	Applied For Not Applicable	
City & State	City & State		-	7. Certificate of Status Desired		\$8.75 Additional
Zip Country	Zip	Country		8, Make check payable to: Dept. of	State (See revi	Fee Required erse side for fee informati
9. Name and Address of C	Current Registered Agent		_	10. If changed, new Registers	ad Agent/Office	
BOPP, HARRY E		Name				
225 IMPERIAL BOULEVARD		Street Address (P.O. Box Number is Not Acceptable)				
LAKELAND FL 33803		Suite, Apt. #. etc				
	ę,	City			FL	Zip Code
agent. I am familiar with, and accept the oblig SIGNATURE (Registered Agent Accepting Appointment A GENERAL PARTNER TH	nt)	LIMITED	PART	DATE NERSHIP OR OTHE		
11. Name(s) of General Partner(s)	11a. Address of Each Gene (Do NOT Use Post Office	eral Partner Box Numbers)	11b.	City, State & Zip Code	11c.	Registration/ Document Number
BOPP, HARRY E	225 IMPERIAL BOULEVAR		LAKELAND FL 33803			
BOPP, JUDITH R	225 IMPERIAL BOULEVA	AR -	LAKELAND FL 33803			
				700002 700002 -02/17 *****5	7783 /9901 26, 25	397~~9 072~005 ****\$26.25
Note: General partners MAY N	NOT be changed on this for	rm; an ame	ndmer	nt must be filed to ch	ange a g	eneral partner
	ce with Section 119.07(3)(k) in the event that the my signature shall have the same legal effects a	information supplie	ed is deeme	d exempt from public access. I furthe	r certify that the	information Indicated or
SIGNATURE	Ros	. ,		DATE	12/2	1/28
12. I do hereby certify that the information supplied Corporations from any liability of non-complians this annual report is true and accurate and that empowered to execute this report as required by	with this filing is voluntarily furnished and does no with Section 119.07(3)(k) in the event that the my signature shall have the same legal effects a	not qualify for the e information supplie	xemption sta	nt must be filed to ch ated in Section 119.07(3)(k), Florida 3 d exempt from public access. I furthe certify that I am a General Partner of	ange a g Statutes I relea	非常来的 eneral se the Divis information nership, red