

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

LIMITED PARTNERSHIP
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Sandra B. Morgham
Secretary of State
DIVISION OF CORPORATIONS

FILED

99 FEB 11 AM 11:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



1. Name of Limited Partnership
1a. DOCUMENT #
A98000001119
SCHWARTZ INVESTMENTS OF SARASOTA, LTD.

Mailing Address 1211 GULF OF MEXICO DRIVE. #512 LONGBOAT KEY F3 34228		Principal Office Address 1211 GULF OF MEXICO DRIVE. #512 LONGBOAT KEY F3 34228		3. Date Formed or Registered 05/06/1998	5a. Capital Contributions as Shown on record. \$980,000.00
2. Mailing Address		2a. Principal Office Address		3a. Date of Last Report	5b. Amount of Capital Contributions in FLORIDA to date.
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. State or Country of Formation FL	
City & State		City & State		6. FEI Number 65-0834519	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip Country		Zip Country		7. Certificate of Status Desired <input type="checkbox"/> \$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 DARNELL, ROBERT W 2033 MAIN STREET, SUITE 400 SARASOTA FL 34237	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code
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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.**

11. Name(s) of General Partner(s) SCHWARTZ, B. ROBERT SCHWARTZ, MARILYN W	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 1211 GULF OF MEXICO D 1211 GULF OF MEXICO D	11b. City, State & Zip Code LONGBOAT KEY F3 34228 LONGBOAT KEY F3 34228	11c. Registration/Document Number 000002778400-8 -02/17/98-01072-007 ****526/25 ****526.25
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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

B. Robert Schwartz

DATE

12/28/98

Typed or Printed Name of General Partner Signing Form

B. Robert Schwartz

Daytime Telephone Number

CR2E003 (8/98)