


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. Mortham Secretary of State DIVISION OF CORPORATIONS	
1. Name of Limited Partnership FLORIDA ONE STOP, LTD.		1a. DOCUMENT # A98000001165	
Mailing Address % AMNED PROPERTIES, INC. 13902 N. DALE MABRY HIGHWAY, SUITE 165 TAMPA FL 33618		Principal Office Address % AMNED PROPERTIES, INC. 13902 N. DALE MABRY HIGHWAY, SUITE 165 TAMPA FL 33618	
2. Mailing Address 5900 Enterprise Pkwy. Suite, Apt. #, etc. City & State Ft. Myers, FL Zip 33905		2a. Principal Office Address 5900 Enterprise Pkwy. Suite, Apt. #, etc. City & State Ft. Myers, FL Zip 33905	
3. Date Formed or Registered 05/11/1998		5a. Capital Contributions as Shown on record \$100.00	
3a. Date of Last Report		5b. Amount of Capital Contributions In FLORIDA to date: 1,076,900.	
4. State or Country of Formation FL		6. FEI Number <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
7. Certificate of Status Desired <input checked="" 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 MYERS, W. PARKINSON % AMNED PROPERTIES, INC. 13902 N. DALE MABRY HIGHWAY, SUITE 165 TAMPA FL 33618		10. If changed, new Registered Agent/Office Name: Chris Bundschu Street Address (P.O. Box Number is Not Acceptable): 5900 Enterprise Pkwy. Suite, Apt. #, etc.: City: Ft. Myers FL Zip Code: 33905	
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: 12/8/98			
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)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/Document Number
CORO INVESTMENTS OF HILLSBOR SOUTHWEST FLORIDA EQUITIES C	13902 N. DALE MABRY H 5900 ENTERPRISE PARKW	TAMPA FL 33618 FT. MYERS FL 33905	P96000061974 P98000022288
4000002758454-1 -01/29/99--01041--009 ****535.00 ****535.00			
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 Chris Bundschu, Pres. Southwest Florida Equities Corp		DATE: 12/8/98 Daytime Telephone Number: 941-693-1000	