

**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 C. E. ACQUISITIONS, LTD.		1a. DOCUMENT # A98000001176	
Mailing Address 491 ZEPHYR WAY JUNO BEACH FL 33408		Principal Office Address 491 ZEPHYR WAY JUNO BEACH FL 33408	
2. Mailing Address Suite, Apt. #, etc. City & State Zip Country		2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country	

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3. Date Formed or Registered 05/08/1998	5a. Capital Contributions as Shown on record \$5.00
3a. Date of Last Report	5b. Amount of Capital Contributions in FL (FICA) by date
4. State or Country of Formation FL	☒ Applied For ☐ Not Applicable
6. FEI Number 65-0829141	☐ \$8.75 Additional Fee Required
7. Certificate of Status Desired	
8. Make check payable to: Dept. of State (See reverse side for fee information)	

9. Name and Address of Current Registered Agent JACKSON, CYNTHIA J ESQ 500 S AUSTRALIAN AVE., 10TH FLOOR WEST PALM BEACH FL 33401		10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code
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) C.E. OF PALM BEACH CORPORATI	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 491 ZEPHYR WAY	11b. City, State & Zip Code JUNO BEACH FL 33408	11c. Registration/Document Number P98000036425
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

Raymond E. Carter

Typed or Printed Name of General Partner Signing Form

RAYMOND E. CARTER

DATE

11/17/98

Daytime Telephone Number

361-775-8067

CR2E003 (8/98)