

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

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

99 APR 16 AM 10:26

1. Name of Limited Partnership

1a. DOCUMENT #  
A98000001343

LONG FAMILY REAL ESTATE LIMITED PARTNERSHIP



Mailing Address

40 KIMBERLY ROEDER, ESQ  
WILLKIE FARRÉ GALLAGHER  
787 SEVENTH AVE  
NEW YORK, NY 10019

Principal Office Address

3191 CORAL WAY, SUITE 800  
MIAMI FL 33145

2. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

2a. Principal Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

P.O. BOX 97 - RTE 620  
GREEN PLAINS FARM  
NORTH, VA  
23128  
USA  
MATTHEWS CITY

3. Date Formed or Registered

05/29/1998

3a. Date of Last Report

4. State or Country of Formation

FL

6. FEI Number

65-0839954

7. Certificate of Status Desired

5a. Capital Contributions as  
Shown on record

\$10.00

5b. Amount of Capital  
Contributions in FLORIDA  
to date

\$-10.-

☐ Applied For  
☐ Not Applicable

☐ \$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

OPPENHEIM, STEVEN P ESQ.  
3191 CORAL WAY, SUITE 800  
MIAMI FL 33145

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number Is Not Acceptable)

444 BRICKELL AVE

Suite, Apt. #, etc.

STE 1000

City

MIAMI

FL

Zip Code

33131

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)

11a. Address of Each General Partner  
(Do NOT Use Post Office Box Numbers)

11b. City, State & Zip Code

11c. Registration/  
Document Number

LONG REAL ESTATE MANAGEMENT, INC

40 KIMBERLY ROEDER, ESQ  
WILLKIE FARRÉ GALLAGHER  
787 SEVENTH AVE  
NEW YORK, NY 10019

P98000048272  
7000002842347--6  
-04/16/99--01079--012  
\*\*\*\*141.25 \*\*\*\*141.25

Signature

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

Signature

DATE

4/7/99

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number