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

## LIMITED PARTNERSHIP ANNUAL REPORT 1999

LANTANA STORAGE PARTNERS, LTD.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

**DOCUMENT#** A98000001389

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SECRETARY OF STATE TALLAHASSEE FLORIDA



Mailing Address  3300 PGA BLVD SUITE 620 PALM BEACH GARDENS FL 33410	Principal Office Address  3300 PGA BLVD SUITE 620 PALM BEACH GARDENS FL 33410		3. Date Formed or Registered 06/04/1998 3a. Date of Last Report	5a. Capital Contributions as Shown on record. \$480,000.00  5b. Amount of Capital Contributions in FLORIDA		
2. Mailing Address Suite, Apt. #. etc.	2a. Principal Office Address  Suite, Apt. #, etc.		4. State or Country of Formation		ributions in FLORIDA te:	
City & State	City & State		6. FEI Number  6.5-08403  7. Certificate of Status Desired	Applied For Not Applicable  \$8.75 Additional		
Zip Country	Zip Country		Fee Required  8. Make check payable to: Dept. of State (See reverse side for fee information)			
9. Name and Address of Current Re	gistared Agent	<u> </u>	40 6-1			
G. Hama and Address of Outlant registered Again		10. If changed, new Registered Agent/Office Name				
COMAC LANTANA, INC. 3300 PGA BLVD., SUITE 620		Street Address (P.O. Box Number Is Not Acceptable)				
PALM BEACH GARDENS FL 33410 Suite, Apt. #,		Suite, Apt. #, etc.	etc.			
	City		FL Zip Code			
10a. Pursuant to the provisions of sections 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submills 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  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 Pa		City, State & Zip Code	11c.	Registration/ Document Number	
COMAC LANTANA, INC.	3300 PGA BOULEVARD, S		M BEACH GARDENS FL	P98000044807 (868) CR2EC003 (878)		UUS (0/30)
•			5000026967467 -11/25/3801062022 *****528.25 ****526.25		746	טאַציי
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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 filling 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 150 miles of						
SIGNATURE DATE 1/4/98						
Typed or Printed Name of General Partner Signing Form reter V. COTO J. E. Daytime Telephone Number 5614775-73-33						