

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 FEB 11 PM 3:09

1. Name of Limited Partnership

1a. DOCUMENT #
A98000001426

FAHS FAMILY LIMITED PARTNERSHIP



Mailing Address 1307 S. EIGHTH STREET LEESBURG FL 34748		Principal Office Address 1307 S. EIGHTH STREET LEESBURG FL 34748		3. Date Formed or Registered 06/09/1998	5a. Capital Contributions as Shown on record. \$380,000.00
2. Mailing Address		2a. Principal Office Address		3a. Date of Last Report	5b. Amount of Capital Contributions in FLORIDA to date: \$698,597
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. State or Country of Formation FL	6. FEI Number EIN 59-3516531
City & State		City & State		7. Certificate of Status Desired	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip		Country		8. Make check payable to: Dept. of State (See reverse side for fee information)	\$8.75 Additional Fee Required

9. Name and Address of Current Registered Agent FAHS, JOHN L JR 1307 S. EIGHTH STREET LEESBURG FL 34748	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) FAHS, JOHN L JR FAHS, GLORIANNE E	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 1307 S. EIGHTH STREET 1307 S. EIGHTH STREET	11b. City, State & Zip Code LEESBURG FL 34748 LEESBURG FL 34748	11c. Registration/Document Number 000002726780- - 6 -12/30/98--01075--014 ****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

John L. Fahs Jr. General Partner
John L. Fahs Jr.

DATE

12/16/98

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

352.787.5969 FL

CR2E003 (8/98)