

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. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

98 DEC 24 AM 10:02

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



1. Name of Limited Partnership

1a. DOCUMENT #  
A98000001533

TITLE PARTNERS OF MARIETTA, LIMITED PARTNERSHIP

Mailing Address

Principal Office Address

1715 N. WESTSHORE BLVD., SUITE 990  
TAMPA FL 33607

2615 SANDY PLAINS ROAD  
MARIETTA GA 30066

3. Date Formed or Registered

06/22/1998

5a. Capital Contributions as  
Shown on record.

\$50,000.00

3a. Date of Last Report

5b. Amount of Capital  
Contributions in FLORIDA  
to date:

4. State or Country of Formation

FL

6. FEI Number

58-2393218

☐ Applied For  
☐ Not Applicable

7. Certificate of Status Desired



\$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

TITLE PARTNERS OF MARIETTA, LIMITED PARTNERSHIP  
NOTIFY SENDER OF NEW ADDRESS  
TITLE PARTNERS OF AMERICA  
1715 N WESTSHORE BLVD STE 990  
TAMPA FL 33607-3916

10. If changed, new Registered Agent/Office

Address (P.O. Box Number is Not Acceptable)

#, etc.

100002740721--1

-01/13/99-01101-022

\*\*\*\*\*358.75 \*\*\*\*\*358.75

I am the purpose of changing the 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, \_\_\_\_\_, Florida Statutes.

SIGNATURE (Registered Agent)

A GENERAL PARTNER

\$350.00 FF

LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY  
ACTIVE WITH THIS OFFICE.

11. Name(s) of General

TITLE PARTNERS OF

88.75 SF

8.75 CERT

\$447.50

11b. City, State & Zip Code

TAMPA FL 33607

11c. Registration/  
Document Number

P95000040945

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-01/13/99-01101-021

\*\*\*\*\*88.75 \*\*\*\*\*88.75

Note: General partners MAY NOT be changed. 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

DATE 11-3-98

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

CR2E003 (8/98)