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

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LIMITED PARTNERSHIP ANNUAL REPORT	FLORIDA DEPARTMENT OF STATE  Sandra B. Mortham  Secretary of State  DIVISION OF CORPORATIONS		SECRETARY OF STATE OIVISION OF CORPORATIONS 98 DEC 21 PM12: 58		
Name of Limited Partnership	1a. DOCUMENT # A98000001933			, prc 51	PM12: 58
McKenzie Properties, Limited			001/5		
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital	Contributions as on record,
6500 Caroline Street Milton, Florida 32570	6500 Caroline Street Milton, Florida 32570		8/13/98 <b>3a.</b> Date of Last Report	\$1,000.00	
			N/A  4- State or Country of Formation	5b. Amount Contribute date:	t of Capital utions in FLORIDA
2. Mailing Address	2a. Principal Office Address		Florida	\$1,000	0.00
Suite, Apt. #, etc.  City & State	Suite, Apt. #, etc. City & State		6. FEI Number 59–3533376	<u> </u>	Applied For Not Applicable
City & State	City & State		7. Certificate of Status Desired		\$8.75 Additional
Zip Country	Zip Country		8. Make check payable to: Dept. of	State (See rever	ree Hequirea
9. Name and Address of Current Registered Agent Name		Name	10. If changed, new Registered Agent/Office		
McKenzie, John Daniel 6500 Caroline Street Milton, Florida 32570		Street Address (P.O. Box Number Is Not Acceptable)  Suite, Apt. #, etc01/08/3901070018  City *****141.25			
Pursuant to the provisions of sections 620.1051 and 620.105. 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 11b.	City, State & Zip Code	11c.	Registration/ Document Number
McKenzie, John Daniel	1		lton, Florida 32570	<b>.</b>	(golo) eve
McKenzie, Mary T.	6500 Caroline Street M		lton, Florida 32570	)	0 0 0 0
				7	
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 turnished and does not qualify for the exemption; stated in Section 119.07(3)(k), Florida Statutes. I release the Division of					
1 do nereticy defutly that the information supplied with this fitting is voluntaring to soluntary transition and does not equally if the exemption state of insection 119.07(3)(k), information from any liability of non-compliance with Seption (19.07(3)(k) in the event that the information hupplied is despited exemptor from public access. If 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 120. Fibrida Statutes.					
SIGNATURE JAM Namel 1 France DATE 12-18-98					
Typod or Rivered Name of Canada Science Science Service Servic					