

A980000218
 FILED BEFORE APRIL 1, 1999 TO AVOID
 REVOCATION AND \$500 PENALTY FEE

**LIMITED PARTNERSHIP
 ANNUAL REPORT
 1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

FILED
 Jun 11 1999 8:00 am
 Secretary of State

1. Name of Limited Partnership RIDAN OF CLEARWATER, LTD.		1a. DOCUMENT # A98000002182	
Mailing Address 860 PINELLAS BAYWAY SOUTH TIERRA VERDE FL 33715	Principal Office Address 860 PINELLAS BAYWAY SOUTH TIERRA VERDE FL 33715	3. Date Formed or Registered 09/17/1998	5a. Capital Contributions as Shown on record \$800,000.00
2. Mailing Address	2a. Principal Office Address	3a. Date of Last Report	5b. Amount of Capital Contributions in FLORIDA to date:
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. State or Country of Formation FL	6. FEI Number <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
City & State	City & State	7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	8. Make check payable to Dept. of State (See reverse side for fee information)
Zip Country	Zip Country		



9. Name and Address of Current Registered Agent BARNES, ROBERT L 2655 MCCORMICK DRIVE CLEARWATER FL 33759	10. If changed, new Registered Agent/Office	
	Name	
	Street Address (P.O. Box Number Is Not Acceptable)	
	Suite, Apt. #, etc.	City
		FL Zip Code

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) DORICH, NICHOLAS	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 860 PINELLAS BAYWAY S	11b. City, State & Zip Code TIERRA VERDE FL 33715	11c. Registration/ Document Number 100002908001--6 -06/17/99--01087--010 ***1026.25 ***1026.25
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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 rely on 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

4-22-99