FILE ON OR BEFORE APRIL 7, 1999 TO AVOID REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

FILED

1999		Secretary of State DIVISION OF CORPORATION	ons 99 APR 2	6 AM 9: 28	
1. Name of Limited Partnership		1a. DOCUMENT # A9800002230		SCURETARE CHARACTE TALLAMASSEE, FLORIDA THAURUM MINIMUM ANN ANN ANN ANN ANN ANN ANN ANN ANN AN	
THE AUGUSTIN FAMILY I	LIMITED PARTNE	(N 88411 88411 88414 88414 11844 11844 11844 11844 11844		
Malling Address 5515 TURKEY LAKE ROAD ORLANDO FL 32819 Principal Office Address 5515 TURKEY LAKE ROAD ORLANDO FL 32819		3. Date Formed or Registered 09/24/1998 3a. Date of Last Report	5a. Capital Contributions as Shown on record \$74,250.00		
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	5b. Aniount of Capital Contributions in FLORIDA to date	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			Applied For Not Applicable	
City & State	City & State		57-3538 4 7. Certificate of Status Desired	\$8.75 Additional Fee Required	
Zip Country	Zıp	Country	8. Make check payable to Dept o	State (See reverse side for fee information)	
9. Name and Address of Currant Registered Agent 10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite. Apt. 8. etc. City FL Zip Code 10a. Pursuant to the provisions of sections 520 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 lis registered diffice or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). Thereby 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) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11a. (Do NOT Use Post Office Box Numbers) 5515 TURKEY LAKE ROAD ORLANDO FL 32819 P80000082240 FINITE Maneurs 6. 25 ****10.25.25					
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 regal 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 regulated by chapter 629. Florida Statutes. SIGNATURE DATE A 2 3 / 9 9					

Daytime Telephone Number