

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. Moulton

Secretary of State

DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 DEC 30 AM 10:09

1. Name of Limited Partnership

1a. DOCUMENT #
A98000002786

McClellan Park Family Learning Center, Ltd.

Mailing Address

Principal Office Address

c/o McClellan Park Family Learning Center, Inc.
1744 Seminole Drive
Sarasota, Florida 34239

Mailing and Principal

3. Date Formed or Registered

12/17/98

5a. Capital Contributions as
Shown on record.

\$300,000

3a. Date of Last Report

none

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

\$200,000

4. State or Country of Formation

Florida

6. FEI Number

☒ 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

Cheryl B. Zimmer
1744 Seminole Drive
Sarasota, FL 34239

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)

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

11b. City, State & Zip Code

11c. Registration/
Document Number

McClellan Park Family
Learning Center, Inc.

1744 Seminole Drive

Sarasota, FL 34239

P98000104906

bk
12/30/98

200002726622--8

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

Cheryl B. Zimmer

DATE

12-29-98

Cheryl B. Zimmer, as President of McClellan Park Family

Learning Center, Inc.

Daytime Telephone Number

CR2E003 (8/98)



ACCOUNT NO. : 072100000032

REFERENCE : 083323 4352702

AUTHORIZATION :

Patricia Pigute

COST LIMIT : \$ 526.25

ORDER DATE : December 30, 1998

ORDER TIME : 11:18 AM

ORDER NO. : 083323-005

CUSTOMER NO: 4352702

CUSTOMER: Ms. Lisa Folis
Williams Parker Harrison Dietz
200 South Orange Avenue

Sarasota, FL 34236

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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ANNUAL REPORT FILING

NAME: MCCLELLAN PARK FAMILY
LEARNING CENTER, LTD.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Christopher Smith

EXAMINER'S INITIALS:

RECEIVED
98 DEC 30 PM 4:59
DIVISION OF CORPORATIONS