

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. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

98 DEC 31 PM 1:40

1. Name of Limited Partnership

1a. DOCUMENT #  
B94000000332

SOV FLORIDA L.P., LTD.



Mailing Address

Principal Office Address

2001 ROSS AVENUE  
SUITE 3210  
DALLAS TX 75201

2001 ROSS AVENUE  
SUITE 3210  
DALLAS TX 75201

3. Date Formed or Registered

08/15/1994

5a. Capital Contributions as  
Shown on record.

\$2,500,000.00

3a. Date of Last Report

07/07/1998

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

4. State or Country of Formation

TX

2. Mailing Address

2a. Principal Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. FEI Number

75-2541929

☐ 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

10. If changed, new Registered Agent/Office

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

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

TH EQUITIES, INC.

2001 ROSS AVENUE, SUITE  
3200

DALLAS TX 75201

F94000004246

300002726123--6

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

DATE

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

CR2E003 (8/98)



ACCOUNT NO. : 072100000032

REFERENCE : 080863 4345882

AUTHORIZATION : *Patricia Pyjota*

COST LIMIT : \$526.25

ORDER DATE : December 28, 1998

ORDER TIME : 10:12 AM

ORDER NO. : 080863-010

CUSTOMER NO: 4345882

CUSTOMER: Ms. Meredith Grimes  
Crow Family Holdings  
2001 Ross Avenue  
3200 Trammell Crow Center  
Dallas, TX 75201

ANNUAL REPORT FILING

NAME: SOV FLORIDA L.P.  
LTD.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Angie Glisar

EXAMINER'S INITIALS:

RECEIVED  
99 DEC 30 AM 10:40  
CSC CORPORATION