

**FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP  
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

**FILED**

97 FEB 14 PM 2:13

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



<b>LIMITED PARTNERSHIP ANNUAL REPORT 1997</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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<b>1. Name of Limited Partnership</b>  <b>BULLDOG CAPITAL MANAGEMENT LIMITED PARTNERSHIP</b>	<b>1a. DOCUMENT #</b> <b>B96000000008</b>
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<b>Mailing Address</b> <del>301-B TURNER STREET</del> <del>CLEARWATER FL 34616</del>	<b>Principal Office Address</b> <del>301-B TURNER STREET</del> CLEARWATER FL 34616
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<b>2. Mailing Address</b> 33 N. Garden Ave. Suite 750 Clearwater, FL 34615	<b>2a. Principal Office Address</b> 33 N. Garden Ave. Suite 750 Clearwater, FL 34615
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<b>3. Date Formed or Registered</b> 01/04/1996	<b>5a. Capital Contributions as Shown on record.</b> \$250,000.00
<b>3a. Date of Last Report</b>	<b>5b. Amount of Capital Contributions in FLORIDA to date:</b> 125,000
<b>4. State or Country of Formation</b> DE	<b>6. FEI Number</b> 59-3349779
<b>7. Certificate of Status Desired</b>	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
<b>8. Make check payable to: Dept. of State (See reverse side for fee information)</b>	<input type="checkbox"/> \$8.75 Additional Fee Required

<b>9. Name and Address of Current Registered Agent</b> POLLACK, RONALD J <del>301-B TURNER STREET</del> <del>CLEARWATER FL 34616</del> 33 N. Garden Ave. Suite 750 Clearwater, FL 34615	<b>10. If changed, new Registered Agent/Office</b> Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code
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**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.**

<b>11. Name(s) of General Partner(s)</b> BULLDOG CAPITAL MANAGEMENT,	<b>11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)</b> <del>301-B TURNER STREET</del> 33 N GARDEN AVE Suite 750	<b>11b. City, State &amp; Zip Code</b> CLEARWATER FL 34616 34615	<b>11c. Registration/Document Number</b> V44270
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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 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 Brandon Marion DATE 12/23/96  
 Typed or Printed Name of General Partner Signing Form BRANDON MARION Daytime Telephone Number 813-298-5415

CR2E003 (6/96)