## FILE ON OR BEFORE APRIL 9, 1997 TO AVOID REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1997

MERRY MAIDS LIMITED PARTNERSHIP



FLORIDA DEPARTMENT OF STATE
Sandra Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

B96000000180

## FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA



|   |  |  | ·   |   |
|---|--|--|---|---|
| Mailing Address  860 RIDGE LAKE BLVD. MEMPHIS TN 38120  | Principal Office Address 1209 ORANGE STREET WILMINGTON DE 19801  | 1209 ORANGE STREET                                 |   | 58. Capital Contributions as Shown on record.           |
|   |  |  | 38. Date of Last Report                     | 5h Amount of Capital                                    |
|   |  |  | 4. State or Country of Formation            | 5b. Amount of Capital Contributions in FLORIDA to date: |
| 2. Mailing Address  | 28. Principal Office Address 860 Ridge Loke  | Blvd   | DE DE                                       |   |
| Suite, Apt. #, etc.   | Suite, Apt. #, etc.  |  | 6. FEI Number                               |   |
| City & State  | City & State   | <del></del>  | 47-071823                                   | Applied For Not Applicable                              |
| Zip Country   | Memphis TN   | Country  | 7. Certificate of Status Desired            | \$8.75 Additional Fee Required                          |
| 2.p Journy  | 1''  | Ø USA  | 8. Make check payable to: Dept. of 5        | State (See reverse side for fee information)            |
| 9. Name and Address of Curr   | rent Registered Agent  |  | 10. If changed, new Registere               | d Agent/Office  |
| C T CORPORATION SYSTEM  |  | Name   |   |   |
| 1200 SOUTH PINE ISLAND ROAD   |  | Street Address (P.O. Box Number Is Not Acceptable) |   |   |
| PLANTATION FL 33324   |  |  |   |   |
| 1 2 41/////01/1 2 00021   |  | Sulte, Apt. #, etc.                                |   |   |
|   |  | City   |   | FL Zip Code   |
| SIGNATURE (Registered Agent Accepting Appointment)  A GENERAL PARTNER THA   | T IS A CORPORATION, L<br>ST BE REGISTERED AN   | IMITED PA  | RTNERSHIP OR OTHE                           | R BUSINESS ENTITY                                       |
| 11. Name(s) of General Partner(s)   | Address of Each Conses   | 2 Dordans  |   | 11c. Registration/                                      |
|   | 11a. (Do NOT Use Post Office Bo  | x Numbers)   |   | Second Heart (Second                                    |
| MERRY MAIDS, INC.   | 860 RIDGE LAKE BLVD.   |  | MEMPHIS TN 38120                            | F96000002572  |
| TSSGP LIMITED PARTNERSHIP   | 860 RIDGE LAKE BLVD.   |  | MEMPHIS TN 38120                            | B9300000382   |
|   |  |  | -02/26                                      | 0987110<br>/9701083003<br>51.31 ****351.31              |
| •   | dec  | 351.30   | (may bus)                                   |   |
| Note: General partners MAY NO   | )T be changed on this form   | ı; an amend  | ment must be filed to cha                   | inge a general partner.                                 |
| 12. I do hereby certify that the information supplied with<br>Corporations from any liability of non-compliance we<br>annual report is true and accurate and that my sign<br>empowered to execute this report as required by cl | vith Section 119.07(3)(k) in the event that the inf<br>nature shall have the same legal effects as if ma | formation supplied is o                            | deemed exempt from public access. I further | certify that the information indicated on th            |
| SIGNATURE With de   | Stevens Port   | Jon 1  | Mount Marks                                 | 2/1/97  |

KEITH A. STEVENS

Typed or Printed Name of General Partner Signing Form

(901) 537-8148