

FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

**LIMITED PARTNERSHIP
ANNUAL REPORT
1998**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

98 APR 13 PM 1:11

4/15

1. Name of Limited Partnership

1a. **DOCUMENT #**
B-97000000081

DOSWELL LIMITED PARTNERSHIP

Mailing Address

Principal Office Address

ESI ENERGY, INC.
11760 U.S. HIGHWAY ONE, SUITE 600
NORTH PALM BEACH, FL 33408

ESI ENERGY, INC.
11760 US Highway One
Suite 600
North Palm Beach, FL 33408

3. Date Formed or Registered
2/11/97

5a. Capital Contributions as Shown on record
\$7,500.00

3a. Date of Last Report

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

2. Mailing Address

2a. Principal Office Address

Same as above

4. State or Country of Formation

DE

-0-

Suite, Apt. #, etc.

Suite, Apt. #, etc.

6. FEI Number
95-4223904

☐ Applied For
☐ Not Applicable

City & State

City & State

7. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

Zip

Country

Zip

Country

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

ESI Energy, Inc.
11760 US Highway One, Suite 600
North Palm Beach, FL 33408

Name

J. E. Leon

Street Address (P.O. Box Number Is Not Acceptable)

9250 West Flagler Street

Suite, Apt. #, etc.

City

Miami

FL

Zip Code

33174

10a. Pursuant to the provisions of sections 620.1051 and 620.102, 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)

J. E. Leon

DATE **3/4/98**

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

DOSWELL I, INC.

11760 US Highway One

North Palm Beach FL

P97000013402

200002491112--3
-04/16/98--01101--017
******156.25 ****156.25**

CR2E003 (6/97)

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

Frances M. Carpenter

DATE

Typed or Printed Name of General Partner Signing Form: **Frances M. Carpenter, Secretary**

Daytime Telephone Number

(561) 691-3500