FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999



GARDEN PLAZA LIMITED PARTNERSHIP OF PARADISE

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # B98000000426

FILED 98 OCT -2 AM 10: 20

SUCRETABLY OF STATE TALLAHASSLE, FLORIDA



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9, Name and Address of Current Registered Agent 10, If changed, new Registered Agent/Office FORUZZO, ROBERT A 13577 FEATHER SOUND DRIVE, SUITE 300 CLEARWATER FL 33762 City City City City City City FL Zip Code Total 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) SCHLYTTER, ROBERT O SR. 4201 SOUTH 27TH STREET Note: General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner. Lity Type Code 12, Fordis Statute, Inc. 13, Code Statute, Inc. 14, Code Statute, Inc. 14, Code Statute, Inc. 15, Code Statute, Inc. 16, Code Statute, Inc. 17, Code Statute, Inc. 18, Code Statute, Inc. 19, Code Statute, Inc. 19, Code Statute, Inc. 11, Code Statute, Inc. 11, Code Statute, Inc. 12, Ind. hereby certify that the Information supplied with the filing is evaluaterly buriefled and does not qualify for the exemption stated in Section 110,07(3)(1), Fordis Statute, Indiana the Information supplied with the filing is evaluaterly buriefled and does not qualify for the exemption stated in Section 110,07(3)(1), Fordis Statute, Indiana the Information supplied with the filing is evaluaterly buriefled and does not qualify for the exemption stated in Section 110,07(3)(1), Fordis Statute, Indiana the Information supplied with the filing is evaluaterly buriefled and does not qualify for the exemption stated in Section 110,07(3)(1), Fordis Statute, Indiana the Information supplied a caused several from public access I further certify that the Information registered samples are certified to the Information supplied as the	Zip Country	untry Zip Country					
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City FL Zip Code 10a. Pursuant to the provisions of sections \$20 1051 and \$20 192. Florida Statutes, the above-named limited partnership organized or registered under the lews of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, a both, in the State of Florida. Such change was authorized by its general partners(s). Thereby accept the appointment of registered agent, and facilities. A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(a) of General Partner(s) 11a. Address of Each General Partner (co NOT Use Pool Office box Numbers) SCHLYTTER, ROBERT 0 SR. 4201 SOUTH 27TH STREET MILWAUKEE WI 53221 2000005655522 A *****526.25 *******526.25 ********526.25 *******526.25 *******526.25 ********526.25 ***********************************			Suite, Apt. #. etc.				
10a. Pursuant to the provisions of sections 520 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 time 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). Thereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 520 192. Florida Statutes. 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 (co. NOT Use Post Office box Numbers) SCHLYTTER, ROBERT O SR. 4201 SOUTH 27TH STREET MILWAUKEE WI 53221 20000265325 *******\$26, 25 ***********************************	OLEMANIEM I E GOVE		<u> </u>				
10a. Pursuant to the provisions of sections 820 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 planner (s). I hereby accept the displants 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. (Do NOT Use Poot Office Box Numbers) SCHLYTTER, ROBERT 0 SR. 4201 SOUTH 27TH STREET MILWAUKEE WI 53221 Who hereby certify that the information supplied with this fling 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 lability of non-compliance with Section 95 0.07(3)k) in the event that the information supplied is seamed exempt from public access. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute his report as required by chapter of the information supplied by capture or trustee empowered to execute his report as required by chapter of the infinited partnership, receiver or trustee empowered to execute his report as required by chapter of the Norther Statute. PARE PLANCE ACCEPT ACCEPT THE PARENTEE OF THE STREET STATE OF THE STREE			City		FL	Zip Code	
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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 179.07(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 eath. 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 20. Florida Statutes. DATE POSERT O CONTINUED DATE (VIII) 281-6000				· · · · · · · · · · · · · · · · · · ·	-U. C.J. 4	***320,23	
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SIGNATURE DATE 9-25-98 Vived or Printed Name of General Partner Signing Form ROBERT O. SCHLISTTER Davime Telephone Number (414) 281-6000		NOT be changed on this form	n: an amend	ment must be filed to cha	ange a ge	neral partner.	
Typed or Printed Name of General Partner Signing Form ROBERT O. SCHUSTTER Davime Telephone Number (414) 281-6000	this annual report is true and accurate and that	with this filing is voluntarily furnished and does not ce with Section 19.07(3)(k) in the event that the infi my signature shall have the same legal effects as it	qualify for the exemp	tion stated in Section 119.07(3)(k), Florida S deemed exempt from public access. I further	latutes. I release certify that the in	the Division of formation indicated on	
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