

OCT-22-1998 13:03

SATISKY

919 790 1561 P.04/15

LIMITED PARTNERSHIP ANNUAL REPORT 1998 1999		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 98 DEC 17 AM 10:29	
1. Name of Limited Partnership <i>Sarashire Company Limited Partnership</i>		1a. DOCUMENT # 098 000000527			
Mailing Address <i>90 Drucker & Falk, LLC</i> <i>9286 Warwick Blvd.</i> <i>Newport News, Va.</i> <i>23607</i>		Principal Office Address <i>9286 Warwick Blvd.</i> <i>Newport News, Va. 23607</i>		3. Date Formed or Registered <i>08/24/98</i>	5a. Capital Contributions as Shown on record. <i>2,875,000.00</i>
				3a. Date of Last Report	5b. Amount of Capital Contributions in FLORIDA to date:
2. Mailing Address		2a. Principal Office Address		4. State or Country of Formation	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. FEI Number <i>54-1169388</i>	
City & State		City & State		☐ Applied For ☒ Not Applicable	
Zip		Zip		7. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
Country		Country		8. Make check payable to: Dept. of State (See reverse side for fee information)	
9. Name and Address of Current Registered Agent <i>Hunter, Daniel M</i> <i>227 West Park Ave., Suite 101</i> <i>Winter Park, FL 32789</i>				10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City State FL Zip Code	
10a. Pursuant to the provisions of sections 620, 1001 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) <i>Daniel M. Hunter</i>				DATE <i>12/14/98</i>	
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) <i>OFF, K, Shires, Inc.</i>	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) <i>9286 Warwick Blvd.</i>	11b. City, State & Zip Code <i>Newport News, Va.</i> <i>23607</i>	11c. Registration/Document Number <i>F98000004804</i> 800002726588-5 -12/30/98-01063-018 ****526.25 ****526.25		
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 <i>David C. Falk, Sr.</i>				DATE <i>Oct. 26, 1998</i>	
Typed or Printed Name of General Partner Signing Form				Daytime Telephone Number <i>757-245-1541</i>	

CR2E003 (12/97)