

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

LIMITED PARTNERSHIP
ANNUAL REPORT
1999



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

FILED

99 FEB -8 AM 10: 05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name of Limited Partnership

1a. DOCUMENT #
B98000000678

ODOM FAMILY, L.P., a California limited partnership

Mailing Address
c/o Roy L. Carlson
The R. C. Management Company
3838 Camino del Rio North
Suite 300
San Diego, CA 92108

Principal Office Address
c/o Roy L. Carlson
The R. C. Management Company
3838 del Rio North
Suite 300
San Diego, CA 92108

3. Date Formed or Registered
December 4, 1998

5a. Capital Contributions as
Shown on record
Not exceeding
\$300,000

3a. Date of Last Report

5b. Amount of Capital
Contributions in FLORIDA
to date
Not exceeding
\$300,000

2. Mailing Address

2a. Principal Office Address

4. State or Country of Formation
California

Suite, Apt. #, etc.

Suite, Apt. #, etc.

6. FEI Number

33-0814266

☐ 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

Jim Garner
c/o Saltmarsh, Cleaveland & Gund
501 W. 19th Street
Panama City, FL 32402-1100

10. If changed, new Registered Agent/Office

Name

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

Suite, Apt. #, etc.

City

FL

Zip Code

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.

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

Ruth C. Odom Trust
u/d/t dated 4/13/79,
by its Trustee,
Ruth C. Odom

c/o Roy L. Carlson
The R. C. Management Co
3838 Camino del Rio N.
Suite 300

San Diego, CA 92108

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****526.25 ****526.25

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-02/15/99--01009--021

****437.50 ****437.50

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

Ruth C. Odom,

DATE December 22, 1998

Ruth C. Odom, Trustee, Ruth C. Odom Trust

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number (619) 563-5693

CR2E003 (8/98)