## FILE ON OR BEFORE APRIL 8,1998 TO AVOID **REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP ANNUAL REPORT 1998



ORLANDO-LAKE CONWAY LIMITED PARTNERSHIP

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

1. Name of Limited Partnership

**DOCUMENT#** A18051

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 APR -8 PM 2: 1,7



Mailing Address  9065 LEESBURG PIKE, SUITE 400 VIENNA, VA. 22182	Principal Office Address  8665 LEESBURG PIKE: SUITE 460 WENNA VA 22182			3. Date Formed or Registered 10/12/1984 38. Date of Last Report 12/27/1996	\$3,0	\$3,000,000.00  \$5. Amount of Capital Contributions in FLORIDA	
2. Malling Address 1285 Exe Street, NW Suite, Apt. #, etc. Suite 200 City & State Washington, DC Zip cbuntry 20005 USA	28. Principal Office Address  Description Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  Washington, December 2000  Zip Country  200005		!	4. State or Country of Formation CT 6. FEI Number 06-1117982 7. Certificate of Status Desired 8. Make check payable to: Dept. of	Applied For Not Applicable \$8.75 Additional Fee Required (See reverse side for fee information)		
9. Name and Address of Current Registered Agent			10. If changed, new Registered Agent/Office				
3920 U.S. 10 N. SUITE 331 PALM HARBOR FL 34684  10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-name for the purpose of changing its registered office or registered agent, or both, in the State of Flor agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.			Street Address (P.O. Box Number Is Not Acceptable)  Suite, Apt. #, etc.  City Suite, Apt. #, etc				
SIGNATINE (Perintered Appl Appening Appeignment)	Tais Sheller	Gail	Shelb	y, As Agent DATE	4/8/9	8	
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 Post Office Box	l Partner x Numbers)	11b.	City, State & Zip Code	11c.	Registration/ Document Number	
NHP-HDV NINE, INC.	1225 Eye Street, NW N Suite 200		VIENNA VA 22182 Woshington, DC 2000S 7000024		<u> </u>	P08221	
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.							
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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 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 eath. I further certify that I am a General Partner of the limited partnership, receiver or trustee

**SIGNATURE** 

200,216,2936



ACCOUNT NO. : 072100000032

REFERENCE: 773048 7143669

AUTHORIZATION :

COST LIMIT : \$ 526.25

ORDER DATE : April 7, 1998

ORDER TIME : 10:03 AM

ORDER NO. : 773048-025

CUSTOMER NO: 7143669

CUSTOMER: Delores Huston, Legal Asst

Nchp

1225 Eye Street, Nw

Suite 200

Washington, DC 20005

## ANNUAL REPORT FILING

NAME:

ORLANDO-LAKE CONWAY LIMITED PARTNERSHIP

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Nicole Mcclendon

EXAMINER'S INITIALS: