## 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

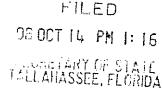
Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

**SIGNATURE** 

Typed or Printed Name of General Partner Signing Form

1a. DOCUMENT # A19788



9/18/98

	qq-AR/cus CA		_			
FARM HILL, LTD.						
Mailing Address	Principal Office Address			3. Date Formed or Registered	5a. Capital Contributions as Shown on record.	
P.O. BOX 3256 PENSACOLA FL 32516	P.O. BOX 3256 PENSACOLA FL 32516			04/26/1985 3a. Date of Last Report	\$200.00	
				10/03/1997	5b. Amount of Capital Contributions in FLORIDA to date:	
2. Mailing Address	2a. Principal Office Address			4. State or Country of Formation	to date:	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			6. FEI Number	Applied For	
City & State	City & State			59-2652614  7. Certificate of Status Desired	Not Applicable  \$8.75 Additional	
Zip Country	Zip Country			\$8.75 Additional Fee Required state (See reverse side for fee information)		
9. Name and Address of Current Registered Agent				10. If changed, new Registered Agent/Office		
BLANTON, JOLYNE R. 8900 U.S. 98 WEST PENSACOLA FL 32508		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 6: for the purpose of changing its registered office or regisegent. I am familiar with, and accept the obligations of	stered agent, or both, in the State of Florid				State of Florida, submits this statement	
SIGNATURE (Registered Agent Accepting Appointment)				DATE		
A GENERAL PARTNER THAT IS MUST	S A CORPORATION, L BE REGISTERED ANI	IMITED ACTIV	PART VE WIT	NERSHIP OR OTHE H THIS OFFICE.	R BUSINESS ENTITY	
11. Name(s) of General Partner(s)	11a. Address of Each General	Partner (Numbers)	11b.	City, State & Zip Code	11c. Registration/ Document Number	
ESCAMBIA CONSTRUCTION CO., I	8900 U.S. 98, WEST		PENSACOLA FL		237213	
				3000026 -10/20/ ****15		
Note: General partners MAY NOT b	e changed on this form	; an am	endme	nt must be filed to cha	inge 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 520 Florida Statutes.

Preside Protime Telephone Number

Escambia Construction Co., Inc.

By Michael Blanton