FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	DITION OF		<u> </u>	TOCT	
1. Name of Limited Partnership	1a. DOCUMENT # A20913		4 1882 W. (F. (M.) A 4 1 1 1 A 4 1 1 A 1 1 A 1 1 A 1 1 A 1 1 A 1 A	97 OCT -1 AM 8: 49	
THE CLOISTERS OF COUNT	RYSIDE, LTD.		! 1871/8/1 /8/1 /19/1 89/16 /8/8 !		
Mailing Address	Principal Office Address 1343 MAIN STREET		3. Date Formed or Registered 10/04/1985 3a. Date of Last Report	5a. Capital Contributions as Shown on record.	
SUITE 500 SARASOTA FL 34236	SUITE 500 SARASOTA FL 34236			5b. Amount of Capital Contributions in FLORIDA to date:	
2. Mailing Address	2a. Principal Office Address	2a. Principal Office Address		,	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			Applied For	
City & State	City & State			Not Applicable \$8.75 Additional	
Zip Country	Zip	Country	8. Make check payable to: Dept. o	Fee Required of State (See reverse side for fee Information)	
9. Name and Address of Current Registered Agent		10. If changed, new Registered Agont/Office			
MANNAUSA, THOMAS J 1343 MAIN STREET PALM TOWERS BLDG., 5TH FLOOR SARASOTA FL 34236		Name Street Address (P.O. Box Number Name N			
10a. Pursuant to the provisions of sections 620 1051 for the purpose of changing its registered office agent. I am familiar with, and accept the obligat SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THA	e or registered agent, of oth, in the State of thors of section 620 1921 forms Statutes.	Florida Such chan	ge was authorized by its general partner(s). I he	ereby accept the appointment of registered	
11. Name(s) of General Partner(s)		BE REGISTERED AND ACTIV 11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)		11c. Registration/	
RIVERWOODS INVEST., INC.		3711 CORTEZ ROAD WEST		G13157	
MANASOTA MGMT., INC.	1343 MAIN ST, 5TH FLO		BRADENTON FL	G66500	
				90-2	
Note: General partners MAY NO				·	
 I do hereby certify that the information suphilid will Corporations from any liability of non-bonig rance in this annual report is true and accurate and trial my empowered to execute this report as required by or 	with Section 119 07(3)(k) in the event that the y signature shall have the same legal effects	e information suppl	lied is deemed exempt from public access. I fur path, I further certify that I am a General Partner	ther certify that the information indicated on of the limited partnership, receiver or trustee	
SIGNATURE	Jet Comment		DATE C	1/8/97	
Typed or Printed Name of General Partner Signing Form	Whomy 5, Man	1704b	Daytimo Telephone Number	P>/2/(