

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

FILED

97 DEC 19 AM 10:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED PARTNERSHIP ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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1. Name of Limited Partnership	1a. DOCUMENT # A22849
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SHADOWOOD VILLAGE, LTD.



JL 12/29

Mailing Address C/O FDISG FDISG P. O. BOX 1527 BOSTON MA 02104-1527	Principal Office Address C/O FDISG FDISG P. O. BOX 1527 BOSTON MA 02104-1527	3. Date Formed or Registered 07/02/1986	5a. Capital Contributions as Shown on record. \$5,400,000.00
2. Mailing Address	2a. Principal Office Address	3a. Date of Last Report 12/16/1996	5b. Amount of Capital Contributions in FLORIDA to date.
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. State or Country of Formation FL	
City & State	City & State	6. FEI Number 11-2811404	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip Country	Zip Country	7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fec Required	
		8. Make check payable to: Dept. of State (See reverse side for fee information)	

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301

10. If changed, now 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
13 REAL ESTATE SERVICES, CONAM PROPERTY SERVICES IV,	8 WORLD FINANCIAL CEN 1764 SAN DIEGO AVENUE	NEW YORK NY 10285 SAN DIEGO CA 92110	F93000000791 B93000000130

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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 _____ See Attached _____ DATE **12/16/97**

Typed or Printed Name of General Partner Signing Form **E. Scott Dupree, V.P.** Daytime Telephone Number **(619) 297-6771**

CR2E003 (6/97)

[SIGNATURE PAGE SHADOWOOD]

SHADOWOOD VILLAGE, LTD.,
a Florida limited partnership

CON AM PROPERTY SERVICES IV, LTD.,
a California limited partnership,
general partner

By: CONTINENTAL AMERICAN DEVELOPMENT, INC.,
a California corporation,
general partner

By: 
Its: VICE PRESIDENT