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

LIMITED PARTNERSHIP ANNUAL REPORT 1999

Typed or Printed Name of General Partner Signing For



FLORIDA DEPARTMENT OF STATE

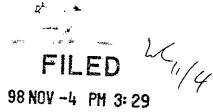
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # A30743

PENMAN PLAZA ASSOCIATES, LTD.



SECRETARY OF STATE TALLAHASSEE FLORIDA



10/14/98

Daytime Telephone Number

404-261-327

Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.	
300 NORTHCREEK	300 NORTHCREEK		10/26/1990 3a. Date of Last Report	\$7,500.00	
3715 NORTHSIDE PARKWAY, NW. SUITE 105		3715 NORTHSIDE PARKWAY, NW. SUITE 105			
ATLANTA GA 30327	ATLANTA GA 30327		11/26/1997	5b. Amount of Capital	
			4. State or Country of Formation	Contributions in FLORIDA to date:	
2. Mailing Address	2a. Principal Office Address				
Suite, Apt. #, etc.	Suite, Apt. #, etc.		FL 6. FEI Number		
				Applied For	
City & State	City & State	City & State		☐ Not Applicable	
Zip Country	710	Zlp Country		\$8.75 Additional Fee Required	
2.p Country	Zip		8. Make check payable to: Dept. of	8. Make check payable to: Dept. of State (See reverse side for fee information)	
				·····	
9. Name and Address of Current Registered Agent		10. If changed, new Registered Agent/Office			
LADDELL CAMELL		Name			
LAPRELL, SAMUEL L.		Street Address (P.O. Box Number Is Not Acceptable)			
1300 GULF LIFE DRIVE, SUITE 800 JACKSONVILLE FL 32207		Sulte, Apt. #, etc.			
JACKSONVIELE PL 32207			· · · · · · · · · · · · · · · · ·		
		City		FL Zip Code	
SIGNATURE (Registered Agent Accepting Appointment)			DATE		
A GENERAL PARTNER THA MUS	T IS A CORPORATION, ST BE REGISTERED A <mark>I</mark>			R BUSINESS ENTITY	
11. Name(s) of General Partner(s)	11a. Address of Each Gene (Do NOT Use Post Office I	ral Partner Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number	
CONSOLIDATED MED PROP IN 3715 NORTHSIDE PKW		Y,#	atlanta ga	P24488	
			400002	6813341	
			*****[/3801068012 41.25 ****141.25	
Note: General partners MAY NO					
12. I do hereby certify that the information supplied with Corporations from any liability of non-compliance withis annual report is true and accurate and that my sempowered to execute this report as required by children.	th Section 119.07(3)(k) in the event that the is signature shall have the same legal effects as	nformation supplie	ed is deemed exempt from public access. I further	certify that the information indicated on	

McClain