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

DOCUMENT# Ä32246

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 NOV 18 AM 9: 15

BRANDON LAND PARTNERS, LTD.	

Mailing Address	Principal Office Address			3. Date Formed or Registered	5a. Capital Contributions as Shown on record.			
900 NORTH MICHIGAN AVENUE	900 NORTH MICHIGAN AVENUE			11/20/1991	\$1,389,556.38 5b. Amount of Capital Contributions in FLORIDA to date: \$1,389,556.38			
CHICAGO IL 60611	CHICAGO IL 60611			3a. Date of Last Report				
				12/31/1997				
3 1000 1000				4. State or Country of Formation				
2. Mailing Address	2a. Principal Office Address			FL				
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For Not Applicable			
City & State	City & State			36-3796263				
				7. Certificate of Status Desired		\$8.75 Additional Fee Required		
Zip Country	Zip	Zip Country			8. Make check payable to: Dept. of State (See reverse side for fee information)			
				40				
9. Name and Address of Current Re	gistered Agent	Name	10. If changed, new Registered Agent/Office					
C T CORPORATION SYSTEM		Street Addr						
1200 S. PINE ISLAND ROAD	Street Addr		BSS (P.O. B	ss (P.O. Box Number Is Not Acceptable)				
PLANTATION FL 33324	Suite, Apt. #		etc.					
		City		FI Zip Code				
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 affice 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.						IESS ENTITY		
11. Name(s) of General Partner(s)	11a. Address of Each General (Do NOT Use Post Office Box		11b.	City, State & Zip Code	11c.	Registration/ Document Number		
USC BRANDON, INC.	900 N. MICHIGAN AVENU		CHICAGO IL 60611-1575		F94000003142			
•			6000026 -11/24/ ****52		\$52865 \$ 801050002 6.25 ****\$26.25			
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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 truste					
	empowered to execute this report as required by chapter 620, Florida Statutes.					

Typed or Printed Name of General Partner Signing Form