

**FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 JAN -2 AM 8: 35

1. Name of Limited Partnership

1a. DOCUMENT #
A94000000671

THE CLUB AT WOODLAND POND, LIMITED PARTNERSHIP



BK 1/9/97

Mailing Address

Principal Office Address

~~400 EAST NORTH STREET
GREENVILLE SC 29601-3084~~

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GREENVILLE SC 29601-3084~~

3. Date Formed or Registered
05/17/1994

5a. Capital Contributions as Shown on record
\$250,000.00

3a. Date of Last Report
12/28/1995

5b. Amount of Capital Contributions in FLORIDA to date:

4. State or Country of Formation
FL

2. Mailing Address

472 Osceola Ave.

2a. Principal Office Address

472 Osceola Ave.

6. FEI Number
59-3244171

Applied For
 Not Applicable

Suite, Apt #, etc.

Suite, Apt #, etc.

7. Certificate of Status Desired **\$8.75 Additional Fee Required**

City & State

City & State

Jacksonville Beach FL

Jacksonville Beach FL

8. Make check payable to: Dept. of State (See reverse side for fee information)

Zip Country
32250 Duval

Zip Country
32250 Duval

9. Name and Address of Current Registered Agent

**BECKERLEG, WILLIAM H
HARBESON BECKERLEG & FLETCHER
637 PARK STREET
JACKSONVILLE FL 32204**

10. If changed, new Registered Agent/Office

Name
Charles E. Hartman
Street Address (P.O. Box Number Is Not Acceptable)
472 Osceola Ave.
Suite, Apt #, etc.
City
Jacksonville Beach FL Zip Code
32250

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 **12/30/96**

**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

MASON-PHILLIPS PROPERTIES OF

~~400 EAST NORTH STREET~~
472 Osceola Ave.

~~GREENVILLE SC 29601~~
**Jacksonville Beach,
FL 32250**

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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

DATE **12/30/96**

Typed or Printed Name of General Partner Signing Form

Charles E. Hartman

Daytime Telephone Number **904-270-1042**

CR2E003 (6/96)