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

LIMITED PÄRTNERSHIP ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

**DOCUMENT #** A95000001401

97 DEC 26 AM 9: 27



REM ISLAND INVESTMENT LIM	ITED PARTNERSHIP				
Mailing Address	Principal Office Address		3. Date Formed or Registered	58. Parts Congligated by 2-, 769  Shown of record  5b. Amount of Capital Contributions in FLORIDA to date:	
C/O GEM ISLAND INVESTMENT, INC.	C/O GEM ISLAND INVESTMENT, INC. ONE JOHN'S ISLAND DR. VERO BEACH FL 32963		09/18/1995		
ONE JOHN'S ISLAND DR.			3a. Date of Last Report		
VERO BEACH FL 32963			12/10/1996		
			4. State or Country of Formation		
2. Malling Address	2a. Principal Office Address				
3300 PGA BLVD			FL		
Suite, Apt. #, etc. Suite #805	Suite, Apt. #, etc.		6, FEI Number	Applied For	
City & State	City & State		65-0607868	Not Applicable	
Palm Beach Gardens, FL			7. Certificate of Status Desired	\$8.75 Additional	
Zip Country	Zip Country		R Make check payable to: Dept	Fee Required of State (See reverse side for fee information)	
33410 USA	Of mane chock payable to begin of care good for the management				
9. Name and Address of Current R	egistered Agent		10. If changed, new Registe	red Agent/Office	
STONE, HELEN E ONE JOHN'S ISLAND DR.  Name Sto Street Address 3 3 0		Name	Ctone Holen F		
		Street Address	one, Helen E oss (P.O. Box Number is Not Acceptable)		
		3300 PGA BLVD			
VERO BEACH FL 32963	Suite, Apt. #, etc. Suite		∍ #805		
	City		m Beach Gardens	Zip Code	
10a. Pursuant to the provisions of sections 620 1051 and		4		FL 33410	
for the purpose of changing its registered office or re agent. I am familiar with, and accept the obligations i	gistered agent, or both, in the State of Flor	ilmilied partiersh ida. Such change	was authorized by its general partner(s). I h	ereby accept the appointment of registered	
SIGNATURE (Registered Agent Accepting Appointment)	O A CODDODATION I	IMITED D			
A GENERAL PARTNER THAT I	S A CORPORATION, L BE REGISTERED AN	IMITED P	AKTNERSHIP OR OTH WITH THIS OFFICE	ER BUSINESS ENTITY	
	Address of Each Genera	Partner 4	1b. City, State & Zip Code	11c. Registration/	
11. Name(s) of Goneral Partner(s)	118. (Do NO1 Use Post Office Bo	x Numbers)	ID.	2 - 2 - Doctinient Norther	
GEM ISLAND INVESTMENT, INC.	ONE JOHN'S ISLAND DR.		VERO BEACH FL 32963	P95000071596	
				P95000071596	
			800002 -01/0 ****	92487-070025-025 541.25	

12. I do hereby certify that the information supplied with this filling 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 an inade under eath. I further certify that I am a General Partner of the limited partnership, receiver or trusted