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

## LIMITED PARTNERSHIP ANNUAL REPORT 1999

**SIGNATURE** 

Typed or Printed Name of General Partner Signing



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

1999		DIVISION OF CORPORA	rions	00.0==		and off	
1. Name of Limited Partnership	<sup>1a.</sup> A9	DOCUMENT 5000001401	98 DEC 21 AM 8: 38				
GEM ISLAND INVESTMENT LIMITED PARTNERSHIP				a)12/3)			
Mailing Address Principal Office Address  3300 PGA BLVD SUITE 805 C/O GEM ISLAND INVESTMENT, INC.  PALM BEACH GARDENS FL 33410 ONE JOHN'S ISLAND DR.  VERO BEACH FL 32963				3. Date Formed or Registered 09/18/1995 3a. Date of Last Report 12/26/1997	5a. Capital Contributions as Shown on record. \$6,712,672.02  5b. Amount of Capital Contributions in FLORIDA to date:		,,,,,
2. Mailing Address Suite, Apt. #, etc.	pt. #, etc. Suite, Apt. #, etc.			4. State or Country of Formation FL 6. FEI Number 65-0607868	6,675,	Dutions in FLORIDA  267.31  Applied For Not Applicable	31 Cg
City & State  Zip Country	Zip			7. Certificate of Status Desired  8. Make check payable to: Dept. of		\$8.75 Additional Fee Required	n)
for the purpose of changing its registered office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.  SIGNATURE (Registered Agent Accepting Appointment)  A GENERAL PARTNER THAT IS A CORPORATION			Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc12/31/98-01078-001 City #***526. FL ####0006.25 - Imed limited partnership organized or registered under the laws of the State of Florida, submits this statement lorida. Such change was authorized by its general partner(s), I hereby accept the appointment of registered  DATE  LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY				
	110	ISTERED AND ACT Address of Each General Partner	446	City, State & Zip Code	11c.	Registration/	_
11. Name(s) of General Partner(s)  GEM ISLAND INVESTMENT, INC.		NOT Use Post Office Box Numbers OHN'S ISLAND DR.		RO BEACH FL 32963 P950000718		Document Number	CR2E003 (8/98)
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.							
<ol> <li>I do hereby certify that the information supplie Corporations from any liability of non-compliar this annual report is true and accurate and tha</li> </ol>	nce with Section 119.07(3)(i	<ul> <li>k) in the event that the information su</li> </ul>	pplied is deem	ed exempt from public access. I further	certify that the is	information indicated on	e