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

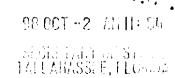
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

SIGNATURE ____
Typed or Printed Name of Ge

1a. DOCUMENT # **A9600000022**



6001 F.L.P., A LIMITED PART	TNERSHIP GO	4-PR	\sim				
Malling Address	Principal Office Address	Principal Office Address			3. Date Formed or Registered 5a. Capital Contributions as Shown on record.		
6001 PALMER BLVD. SARASOTA FL 34232	6001 PALMER BLVD. SARASOTA FL 34232				\$976,945.00 5b. Amount of Capital Contributions in FLORIDA to date:		
2. Mailing Address	28. Principal Office Address	2a. Principal Office Address			10 04	Ne:	
Sulte, Apt. #, etc.	Sulte, Apt. #, etc.	Sulte, Apt. #, etc.		FL 6. FEI Number	<u> </u>	Applied For	
City & State	City & State	City & State		65-0649515		Not Applicable	
p Country Zip		Country		7. Certificate of Status Desired	\$8.75 Additional Fee Required		
				8. Make check payable to: Dept. of s	State (See rev	erse side for fee Information)	
9. Name and Address of Current Registered Agent			10. If changed, new Registered Agent/Office				
ANDERSON, MARRY M 6001 PALMER BLVD. SARASOTA FL 34232		Name					
		Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc.					
10a. Pursuant to the provisions of sections 620.1051 for the purpose of changing its registered office of agent. I am familiar with, and accept the obligation SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THA	or registered agent, or both, in the State of Flo ons of section 620.192, Florida Statutes.	rida. Such chang	ge was authoriz	zed by its general partner(s). I hereby	State of Flori	ppointment of registered	
11. Neme(s) of General Partner(s)	11a. Address of Each Gener		11b.	City, State & Zip Code	11c.	Registration/ Document Number	
ANDERSON, HARRY M TRUSTEE	6001 PALMER BLVD.			SARASOTA FL 34232		Document Number	
ANDERSON, GAY BEE TRUSTEE	ON, GAY BEE TRUSTEE 6001 PALMER BLVD.		SARASOTA FL 34232				
ስ				40000 20 -10/09 *****5/	/980	844 7 1004005 ****\$26.25	
Note: General partners MAY NO	T be changed on this form	n; an ame	endment	t must be filed to cha	nge a ¤	eneral 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 it am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by opened 620, Florida Statutes.