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

LIMITED PARTNERSHIP ANNUAL REPORT -1999



FLORIDA DEPARTMENT OF STATE

Şandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

a. DOCUMENT # A96000002500

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 NOV 16 PH 12: 07

RCJ OF WINTER PARK NO. 3, LTD.								
Mailing Address  500 PARK AVENUE SOUTH SUITE 202 WINTER PARK FL 32789  2. Mailing Address Suite, Apt. #, etc. City & State	Principal Office Address  500 PARK AVENUE SOUTH SUITE 202 WINTER PARK FL 32789  Za. Principal Office Address Suite, Apt. #, etc. City & State		3. Date Formed or Registered 01/01/1997 3a. Date of Last Report 01/05/1998 4. State or Country of Formation FL 6. FEI Number 59-34/ AP-PLIED FOR 7. Certificate of Status Desired	Not Applicable				
Zip Country	Zip	Zip Country		\$8.75 Additional Fee Required  State (See reverse side for fee information)				
9. Name and Address of Curren PRICE, PAMELA 0 201 E. PINE STREET, #1200 ORLANDO FL 32801  10a. Pussuant to the provisions of sections 620.1051 are for the purpose of changing its registered office or agent. I am familiar with, and accept the obligation SIGNATURE (Registered Agent Accepting Appointment)  A GENERAL PARTNER THAT MUS	d 620.192, Florida Statutes, the above-namer agistered agent, or both, in the State of Florid of section 620.192, Florida Statutes.	Suite, Apt. #, e City  d limited partners ta, Such change of	hip organized or registered under the laws of the was authorized by its general partner(s). I hereb  DATE.  PARTNERSHIP OR OTHE	FL Zip Cody  State of Florida, submits this Satement y accept the appointment of pagistered				
11. Name(s) of General Pertner(s)  HOLLER, ROGER W JR.  HOLLER, JULIETTE A	Address of Each General (Do NOT Use Post Office Bo 500 PARK AVENUE SOUT 500 PARK AVENUE SOUT	× Numbers)	****15	Registration/ Doctment Number  88 88 88 88 88 88 88 88 88 88 88 88 8				
Note: General partners MAY NOT	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	f
	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 indi	cated 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, receives	or trustee
	empowered to execute this report as required by chapter 620, Florida Statutes.	i
	ENATURE DATE 10/20/98	
SIG	SNATURE DATE 10/20/98	

SI	GN	ATI	URE

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number