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

LIMITED PARTNERSHIP ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

REAL LODGING, LTD

DOCUMENT # **A9700000500**

FILED 97 DEC 29 PH 3: 39

SECRETALA OF STATE TALLAHASSEE, FLORIDA



Mailing Address 522 SCOTTY'S LANE TALLAHASSEE FL 32303		Principal Office Address 522 SCOTTY'S LANE TALLAHASSEE FL 32303		3. Date Formed or Registered 02/27/1997 38. Date of Last Report	5a. Capital Contributions as Shown on record.	
2. Mailing Address Sulte, Apt. #, etc. City & State Zip Country		2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country		4. State or Country of Formation FL 6. FET Number 59-3434.93 7. Certificate of Status Desired	\$8.75 Additional Fee Required	
			····	8. Make check payable to: Dept. of	8. Make check payable to: Dept. of State (Soc reverse side for fee information)	
9. Name and Address of Current Registered Agent			10. II changed, new Registered Agent/Office Name			
for the purpose of changing its registered office or registered agent, or both, in the State of Flor agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment)				Streel Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code ad limited partnership organized or registered under the laws of the State of Florida, submits this statement pride. Such change was authorized by its general partner(s). Thereby accept the appointment of registered.		
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		11a. Address of Each Genera (Do NOT Use Post Office Bo	Destant	1b. City, State & Zip Code	11c. Registration/ Document Number	
ANDERSON, RICHAR		522 SCOTTY'S LANE		TALLAHASSEE FL 32303		
				200002 -01/09	396222 6 /3801110016 56.25 ****156.25	
	533	21.601 0		dee		
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 filting 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 eath. 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 _

Quands. anduron

DATE _ 12/24/41

Daylime Telephone Number 23-783-7727

CR2E003 (6/97)