## FILE ON OR BEFORE APRIL 7, 1999 TO AVOID **REVOCATION AND \$500 PENALTY FEE**

## LIMITED PARTNERSHIP ANNUAL REPORT 1999



## FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS FILED

,			]	ZT 151 51 00
1. Name of Limited Partnership	1a. DOCUMEN A97000023		18.GREET ARY CE Stores	
LAFAYETTE I ASSOCIATES, LT	D.		(	80111
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as
95 SOUTH FEDERAL HIGHWAY, SUITE 200 ~ BOGA RATON FL 33432	-85-SOUTH FEDERAL HIGHWAY. SUITE 200- BOCA RATON FL-32432		10/30/1997 3a. Date of Last Report 03/05/1998	\$500,000.00
			4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date
2. Mailing Address  1819 PEACHTREE ROAD, NE. Suite, Apt. #, etc.	2a. Principal Office Address  1811 PEACHTREE ROND, NE Suite, Apt #, etc.		FL	
SUITE GID City & State	SUITE GIO City & State		6. FEI Number 72-1402585	Applied For  Not Applicable
ATLANTA GA  Zip Country	ATLANTA, GA Coun	try	7. Certificate of Status Desired  8. Make check payable to Dept. of	\$8.75 Additional Fee Required State (See reverse side for fee information
80309	30309			
9. Name and Address of Current R TAGUE, BRIAN P	Nar		10. If changed, new Registered	Agenl/Office
201 BISCAYNE BLVD., 26TH FLOOR MIAMI FL 33131		Suite Apt #, etc 4000026561464 2-04/30/99 -01141007  City ****526.25 ****\$526.25		
10a. Pursuant to the provisions of sections 620, 1051 and 6 for the purpose of changing its registered office or reg agent. 1 am familiar with, and accept the obligations of SIGNATURE (Registered Agent Accepting Appointment).  A GENERAL PARTNER THAT I	istered agent, or both, in the State of Florida Surf section 620 192, Florida Statutes  S A CORPORATION, LIM	ch change was aut	herized by its general partiler(s). Therefore  DATE  TNERSHIP OR OTHI	by accept the appointment of registered
11. Name(s) of General Partner(s)	BE REGISTERED AND A  Address of Each General Partne  11a. (Do NOT Use Post Office Box Non:	CTIVE WI	City, State & Zip Code	11c. Registration/
LAFAYETTE I GP, INC.	95 SOUTH FEDERAL HIGH	E	BOCA RATON FL 33432	P97000092208
•				W.
Note: General partners MAY NOT	be changed on this form; ar	n amendme	ent must be filed to ch	ange 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 if 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 putric access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have by same legal effects as if made under oath 1 further certify that I am a General Partner of the limited partnership, receiver or trusted empowered to execute this report as required by chapter 620, Florida Statutes.

**SIGNATURE** 

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number