

**FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP ANNUAL REPORT 1997	 FLORIDA DEPARTMENT OF STATE Sandra Mortham Secretary of State DIVISION OF CORPORATIONS
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 NOV - 1 AM 9:29



1. Name of Limited Partnership	1a. DOCUMENT # B92000000056
HIDDEN HILLS GOLF LIMITED PARTNERSHIP	

Mailing Address C/O NATIONAL FAIRWAYS, INC. 71 ARCH STREET 2ND FLOOR GREENWICH CT 06830 US	Principal Office Address C/O NATIONAL FAIRWAYS, INC. 71 ARCH STREET 2ND FLOOR GREENWICH CT 06830 US	3. Date Formed or Registered 12/17/1992	5a. Capital Contributions as Shown on record. \$990,000.00
2. Mailing Address 1062 Church Hill RD	2a. Principal Office Address 1062 Church Hill RD	3a. Date of Last Report 02/13/1996	5b. Amount of Capital Contributions in FLORIDA to date:
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. State or Country of Formation DE	
City & State FAIRFIELD CT	City & State FAIRFIELD CT	6. FEI Number 06-1356393	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip 06432	Zip 06432	7. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	10. If changed, new Registered Agent/Office
	Name
	Street Address (P.O. Box Number is Not Acceptable)
	Suite, Apt. #, etc.
	City
	FL Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) _____ DATE _____

**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 Partner(s) NATIONAL FAIRWAYS, INC.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 71 ARCH STREET 2ND FL 1062 Church Hill RD	11b. City, State & Zip Code GREENWICH CT 06802 FAIRFIELD CT 06432	11c. Registration/Document Number F9200000747
600002000036--4 -11/08/96--01024--019 ****585.00 ****585.00 KWM/cus			

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 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 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 Spencer C. Monroe **Spencer C. Monroe, TREAS.**
 NATIONAL FAIRWAYS, INC. G.P. DATE 9/13/96
 HIDDEN HILLS GOLF L.P. Daytime Telephone Number 209-371-1200

CR2E003 (6/96)