

**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
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FILED

98 DEC 28 PM 12:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



1. Name of Limited Partnership SOUTHEAST RESIDENTIAL PARTNERS, L.P.	1a. DOCUMENT # B96000000346
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Mailing Address C/O AEC 120 WOOSTER STREET NEW YORK NY 10012	Principal Office Address 1013 CENTRE ROAD WILMINGTON DE 19805
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3. Date Formed or Registered 09/06/1996	5a. Capital Contributions as Shown on record. \$100.00
3a. Date of Last Report 01/26/1998	
4. State or Country of Formation DE	5b. Amount of Capital Contributions in FLORIDA to date:

2. Mailing Address 5850 T.G. Lee Blvd. Suite, Apt. #, etc. Suite 345 City & State Orlando FL Zip 32822	2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country
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6. FEI Number 13-3842280	<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
7. Certificate of Status Desired <input 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 JUBELT, PAUL C 5850 T.G. LEE BLVD., STE. 300 ORLANDO FL 32822
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10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City State 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) *Paul C Jubelt* DATE 12/21/98

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) SOUTHEAST RESIDENTIAL CORP.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) C/O AEC 120 WOOSTER S	11b. City, State & Zip Code NEW YORK NY 10012	11c. Registration/Document Number F96000002485
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CR2E003 (8/98)

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 *Paul C Jubelt* DATE 12/18/98
 Typed or Printed Name of General Partner Signing Form Andrew D. Jubelt Daytime Telephone Number 212-925-9600