

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 JAN 20 PM 3:59

1. Name of Limited Partnership

1a. DOCUMENT #
897000000680

Golden West Limited Partnership

Mailing Address

**448 Viking Drive
Suite 220
Virginia Beach, VA 23452**

Principal Office Address

**448 Viking Drive
Suite 220
Virginia Beach, VA 23452**

3. Date Formed or Registered

12/16/97

5a. Capital Contributions as Shown on record.

\$122,500.00

3a. Date of Last Report

Initial Report

5b. Amount of Capital Contributions in FLORIDA to date:

\$122,500.00

4. State or Country of Formation

Virginia

2. Mailing Address

448 Viking Drive

Suite, Apt. #, etc.

Suite 220

City & State

Virginia Beach, Virginia

Zip

Country
U.S.A.

2a. Principal Office Address

448 Viking Drive

Suite, Apt. #, etc.

Suite 220

City & State

Virginia Beach, Virginia

Zip

Country
U.S.A.

6. FEI Number

54-1823322

Applied For
 Not Applicable

7. Certificate of Status Desired

\$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

**Corporation Service Company
1201 Hays Street
Tallahassee, Florida 32301**

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)

Golden West, Inc.

11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)

**448 Viking Drive
Suite 220**

11b. City, State & Zip Code

**Virginia Beach, VA
23452**

11c. Registration/Document Number

F97000006651

**600002412536--S
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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

Steven Sandherr PRESIDENT
STEVEN SANDHERR

DATE

12-23-97

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number **(757) 463-5000**

CR2E003 (6/97)