## 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

1. Name of Limited Partnership

1a. DOCUMENT # A25217

LE PARC OF NAPLES, LTD.

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98 OCT 29 AM 9: 36

SECRETARY OF STATE TALLAHASSEE FLORIDA



Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.						
4200 GULF SHORE BOULEVARD NORTH	4200 GULF SHORE BOULEVARD NORTH NAPLES FL 34103		09/23/1987	\$6,000,000.00						
NAPLES FL 34103		<b>3a.</b> Date of Last Report 11/24/1997								
3	2a. Principal Office Address		11/24/1997  4. State or Country of Formation  5b. Amount of Capital Contributions in FLORIDA to date:							
2. Mailing Address		FL								
Suite, Apt. #, etc. Suite, Apt. #, etc.			6. FEI Number 65-0009805		Applied For Not Applicable					
City & State	State City & State			\$8.75 Additional						
Zip Country	Zip	Country	Fee Required  8. Make check payable to: Dept. of State (See reverse side for fee information)							
9. Name and Address of Current Ro	10, If changed, new Registered Agent/Office									
		Name								
LUTGERT, SCOTT F 4200 GULF SHORE BLVD.N.		Street Address (P.O. Box Number is Not Acceptable)								
NAPLES FL 33940	Suite, Apt. #, etc.									
		City FL Zip Code								
10a. Pursuant to the provisions of sections 620.1951 and 620.195, 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)	11a. Address of Each General (Do NOT Use Post Office Box	Partner 11b.	City, State & Zip Code	11c.	Registration/ Document Number					
LE PARC DEVELOPERS OF NAPLES	LE PARC DEVELOPERS OF NAPLES 4200 GULF SHORE BLVD		NAPLES FL		J93608					
•			3000026 -11/03/3 ****52	788 8010 6.25	1.					
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 129.07(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 cath. 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 600, 500 to separate.										
SIGNATURE DATE 19/27/98										
HOWARD B. GUTMAN, VICE PRESIDENT OF GENERAL PARTNER (941) 261—6100  Typed or Printed Name of General Partner Signing Form										