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

DOCUMENT# A96000000524

90 TER-9 TH 4: 28

$M \cap \cap \cap$	STREET	1	IMITED

			נעטי נעוק נועני פנונים ושנעט רוובם נורסק וירסב רונקס
Melling Address	Principal Office Address	3. Date Formed or Registered	5a. Capital Contributions as Shown on record.
786 SOUTH ORANGE AVENUE	786 SOUTH ORANGE AVENUE	03/19/1996	\$4 00E 000 00
SARASOTA FL 34236	SARASOTA FL 34236	3a. Date of Lest Report	\$1,095,000.00
		09/08/1997	5b. Amount of Capital
		4. State or Country of Formation	Contributions In FLORIDA to date:
2. Mailing Address	2a. Principal Office Address	FL	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	6. FEI Number	Applied For
City & State	City & State	65-0652610	Not Applicable
	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	7. Certificate of Status Desired	\$8.75 Additional
Zio Country	Zip Country		Fee Required

9. Name and Address of Current Registered Agent	10. If changed, new Registered Agenti/Office		
	Name		
PFLUGNER, J G 2033 MAIN STREET, SUITE 101	Street Address (P.O. Box Number is Not Acceptable)		
SARASOTA FL 34237	Suite, Apt. #, etc.		
	FL PijCyle Z		
404 Diversion to the provisions of exertings 520 1051 and 520 102. Elegida Statutes the s	shows named limited nates which promised or excisioned under the Innue of the State of Election and the 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)

Name(s) of General Partner(s)

11.

11c.

City, State & Zip Code

8. Make check payable to: Dept. of State (See reverse side for fee information)

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. Registration/ 11a. Address of Each General Partner

	[DO NOT OBS POST OFFICE BOX NUMBERS]		DOCUMENT NUMBER
WOOD STREET CORPORATION	786 SOUTH ORANGE AVEN	SARASOTA FL 34236	P96000023719
			 774961 \$301015013
		****52	₿.25 ****526.25.
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 119.07(3)(k) in the event that the information supplied is deemed exampt 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	4- allen	DATE 12-15-98
Typed or Printed Name of General Partner Signing Fo	om FREQUENT BLATIC, V.P. OF GEN.P. D.	eytime Telephone Number 0141-961-6227