FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999

POST STREET PROPERTIES, LTD.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

SIGNATURE

1a. DOCUMENT # **A05393**

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 OCT 12 AM 11: 20

	<u> </u>	

			E ENDER FOR SOUND BUILD CITE	i andibit tall satut atian tilke later jest minitanati atan alah atan dan dari laal		
Mailing Address 9777 WILSHIRE BLVD. SUITE 710 BEVERLY HILLS CA 90212	Principal Office Address 9777 WILSHIRE BLVD. SUITE 710 BEVERLY HILLS CA 90212 28. Principal Office Address		3. Date Formed or Registered 12/17/1976 38. Date of Last Report	58. Capital Contributions as Shown on record. \$500,000.00 5b. Amount of Capital Contributions in FLORIDA to date:		
2. Mailing Address			11/13/1997 4. State or Country of Formation			
E. Maining Problem	Za. V mospai omosvasiose		TX			
Sulte, Apt. #, etc.	Suite, Apt. #, etc.		6, FEI Number 75-1375264	Applied For Not Applicable		
City & State	City & State		7. Certificate of Status Desired	\$8.75 Additional		
Zip Country	Zip	Zip Country		Fee Required 8. Make check payable to: Dept. of State (See reverse side for fee information)		
9. Name and Address of Current Registered Agent		10. If changed, new Registered Agent/Office				
MCDONALD, DONNA % STANLEY R. FIMBERG, INC. 1070 E. INDIANTOWN RD. SUITE 410 JUPITER FL 33477 10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-n for the purpose of changing its registered office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment)		Donna McDonald c/o Stanley R. Fimberg, Inc. Street Address (P.O. Box Number is Not Acceptable) 600 Sandtree Drive Sulte, Apt. M. etc. Suite 212 City Palm Beach Gardens amed limited pertnership organized or registered under the laws of the State of Florida, submits this statement Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered				
A GENERAL PARTNER TH		IMITED PA	ARTNERSHIP OR OTHE WITH THIS OFFICE.	R BUSINESS ENTITY		
11. Name(s) of General Partner(s)	11a. Address of Each General	Partner (Numbers) 11	b. City, State & Zip Code	11c. Registration/ Document Number		
FIMBERG, ST ANLEY R	9777 WILSHIRE BLVD.		BEVERLY HILLS CA	· .		
			10/1 *****!	*6639578 4788-01077025 526.25 ****\$26.25		
			Occ			
Note: General partners MAY N	OT be changed on this form	ı; an amenc	lment must be filed to ch	ange a general partner.		
12. I do hereby certify that the information supplied Corporations from any liability of non-compliancible annual report is true and accurate and that empowered to execute this report as required by	e with Section 119.07(3)(k) In the event that the info my signature shall have the same legal effects as it	ormation supplied is	deemed exempt from public access. I further	r certify that the information indicated on		

Davidson

VAIL _____

Daytime Telephone Number