


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 BERMUDA CLUB APARTMENTS, LTD.		1a. DOCUMENT # A08078			
Mailing Address C/O CHARLES K. GEORGE 4800 LEJEUNE ROAD CORAL GABLES FL 33146		Principal Office Address C/O CHARLES K. GEORGE 4800 LEJEUNE ROAD CORAL GABLES FL 33146		3. Date Formed or Registered 10/29/1979 3a. Date of Last Report 10/06/1997 4. State or Country of Formation FL	
2. Mailing Address Suite, Apt. #, etc. City & State Zip Country		2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country		5a. Capital Contributions as Shown on record. \$480,000.00 5b. Amount of Capital Contributions in FLORIDA to date: \$15,000.00	
				6. FEI Number 59-1950480 <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)	

FILED
 98 DEC 31 AM 9:39
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



9. Name and Address of Current Registered Agent GEORGE, CHARLES K 4800 LE JEUNE ROAD CORAL GABLES FL 33146		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) <i>Charles K. George</i>		DATE <i>12/23/98</i>	
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) SOUTH PARK APARTMENTS G.P.,	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 4800 LEJEUNE ROAD	11b. City, State & Zip Code CORAL GABLES FL 33146	11c. Registration/Document Number P93000042365
200002750232--5 -01/21/99--01092--014 ****193.75 ****193.75			

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 *Charles K. George*, Pres. South Park Apts G.P. Inc. DATE *12/23/98*
 Typed or Printed Name of General Partner Signing Form *Charles K. George* Daytime Telephone Number *(305) 662-4800*

CR2E003 (8/98)