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# A10538

FILED SECRETARY OF STATE DIVISION OF COPPORATIONS

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Mailing Address	Principal Office Address	3, Date Formed or Registered	5a. Capital Contributions as Shown on record.
1375 W. HILLSBORO BLVD.	1375 W. HILLSBORO BLVD.	05/21/1981	\$504,045.84
DEERFIELD BEACH FL 33442	DEERFIELD BEACH FL 33442	3a. Date of Last Report	φου4,υ4ο.04
		09/24/1997	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	59-2117469	Not Applicable
		7. Certificate of Status Desired	\$8.75 Additional
Zip Country	Zip Country	8. Make check payable to: Dept. of	Fee Required State (See reverse side for fee information)
A Name and Address of	Current Pagistaned Ament	10 If changed now Posicions	A Annat/Office

9. Name and Address of Current Registered Agent	10. If changed, new Registered Agent/Office
ANDERSON, LARRY W	Name
1375 W. HILLSBORO BLVD.	Street Address (P.O. Box Number is Not Acceptable)
DEERFIELD BCH. FL 33442	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)

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)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number
ANDERSON, LARRY W	1375 W. HILLSBORO BLV	DEERFIELD BEACH FL	
		8000026 -11/24/9	956385 801072015
		****53	5.00 ****535.00
4	√]

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		DATE
Typed or Printed Name of General Partner Signing Form LARI	ey W. Anderson	Daytime Telephone Number 254-421- 7888