FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1998

Typed or Printed Name of General Partner Signing Form



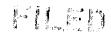
FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # **A11223**



97 DEC 16 PM 4:43

SLORE MAY DE CHA! TALLAHASSEE, FLORIDA

Daytime Telephone Number ______



		ITC LIMITED			/			
- Little - Market						St. 12/1		
falling Address	Principal Office Address			3. Date Formed or Registered	5a. Capil	lal Contributions as vn on record.		
632, N.W. 43RD STREET	2632, N.W. 43RD STREET			09/24/1981	\$400 000 00			
B-95 CAMECULE EL 20000			3a. Date of Last Report		\$100,000.00			
AINESVILLE FL 32606	GAINESVILLE FL 32606			12/17/1996	5b. Amo	unt of Capital ributions in FLORIDA		
2. Mailing Address	28. Principal Office Address	28. Principal Office Address		4. State or Country of Formalian	101,200,60			
Sulte, Apt. #, etc.	Suite, Apt. #, etc.			6 FEI Number				
N 6 A	Ch. S Chair	City P State		59-2154605		Applied For Not Applicable		
ity & State	City & State	/ & State		7. Certificate of Status Desired	\$8.75 Additional			
ip Country	Zip Country			Fee Required 8. Make check payable to: Dept. of State (See reverse side for fee informat				
				O. Make check payable to: Dept. or	State (See rev	verse side for tee informatio		
9. Name and Address of Current Registered Agent		10. If changed, new Registered Agent/Office						
HENRY, NANCY J. 2632 N.W. 43RD ST., B-95 GAINESVILLE FL 32606		Name						
		Street Address (P.O. Box Number Is Not Acceptable)						
		Suite, Apt. #, etc.						
		City		FL Zip Code				
BONATURE (Pagistered Agent Accepting Appointme								
A GENERAL PARTNER TH	IAT IS A CORPORATION,	LIMITED P	ART	IERSHIP OR OTHE	R BUSI	NESS ENTITY		
A GENERAL PARTNER TH	AT IS A CORPORATION, UST BE REGISTERED AN	LIMITED P	ARTI	IERSHIP OR OTHE H THIS OFFICE.	R BUSI	Reg-stration/		
A GENERAL PARTNER TH	AT IS A CORPORATION, UST BE REGISTERED AN	LIMITED P	ART	IERSHIP OR OTHE				
A GENERAL PARTNER TH	AT IS A CORPORATION, UST BE REGISTERED AN	LIMITED P	ARTI WIT 1b.	IERSHIP OR OTHE H THIS OFFICE.	R BUSI	Reg-stration/		
A GENERAL PARTNER TH M 1. Name(s) of General Partner(s)	AT IS A CORPORATION, UST BE REGISTERED AN Address of Each Goner (Inc. NOT Use Post Office B	LIMITED P	ARTI WIT 1b.	NERSHIP OR OTHE H THIS OFFICE. City, State & Zip Code ESVILLE FL. 50002: -12/19.	11c.	Registration/ Document Number		