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

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|---|--|--|---|--|--|
| LIMITED PARTNERSHIP ANNUAL REPORT 1999 | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS | | SECRETA DIVISION OF | FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 98 DEC 22 PM 4: 03 | |
| 1. Name of Limited Partnership | 1a. DOCUMENT # A11967 | | 30 000 2 | 2 111 4.00 | |
| RSP IV CRITERION, LTD. | | | | | |
| Mailing Address Principal Office Address | | | 3. Date Formed or Registered | 5a. Capital Contributions as Shown on record. | |
| 200 LAURA STREET JACKSONVILLE FL 32202 | 200 LAURA STREET JACKSONVILLE FL 32202 | | 01/20/1982 3a. Date of Last Report | \$96.00 | |
| 2. Mailing Address | 2a. Principal Office Address | | 12/31/1997 4. State or Country of Formation | 5b. Amount of Capital Contributions in FLORIDA to date: | |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | | FL 6. FEI Number | | |
| | | | 59-3208058 | Applied For Not Applicable | |
| City & State | City & State | | 7. Certificate of Status Desired | | |
| Zip Country | Zip | Country | 8. Make check payable to: Dept. of | \$8.75 Additional Fee Required State (See reverse side for fee Information) | |
| 9 Name and Address of Current Registered Agent | | | 10. If changed, new Registered | Agent/Office | |
| F&L CORP. 200 LAURA STREET JACKSONVILLE FL 32202 | | Name | | | |
| | | Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. | | | |
| | | | | | |
| 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, 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) | 11a. Address of Each General | Partner Numbers) | 11b. City, State & Zip Code | 11c. Registration/ Document Number | |
| RRC GENERAL SPC, INC. 121 W. FORSYTH ST., S | | | JACKSONVILLE FL 32202 1 0 0 0 0 2 - 01/15 ****22 | P93000074520 7443810 /93-01037-001 05.00 ****141.25 | |
| | | | ante.L. | | |

empowered to execute this report as frequired by chapter 620, Florida Statutes.

SIGNATURE

DATE 12-14-98

Typed or Printed Name of General Partner Signing Form The Telephone Number 904/356-7000

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 fiebility of non-completed 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 eath. I further certify that I am a General Partner of the limited partnership, receiver or trustee