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

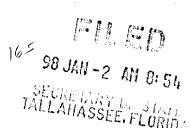
LIMITED PARTNERSHIP **ANNUAL REPORT** 199R



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State



	DIVIS	SION OF CORPORATIO	ns ""-LAMASSI	EE.FIABIL	
1. Name of Limited Partnership	1a. DOCUMENT # A12951			- HASSEE, FLORIDA	
WHISPERING PINES, LTD.					
·				9/1/15	
Malling Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.	
P.O. BOX 1927	CITRUS AVE.		08/04/1982	\$900.00	
WAUCHULA FL 33873	WAUCHULA FL 33873		3a. Date of Last Report 12/20/1996		
			4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:	
2. Mailing Address	28. Principal Office	Address	FL		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 59-2372277	Applied For	
City & State	City & State		7. Certificate of Status Desired	Not Applicable \$8.75 Additional	
Zip Country	Zip	Country	8. Make check payable to: Dept. o	\$8.75 Additional Fee Required f State (See reverse side for fee information)	
9. Name and Address of Curren	t Registered Agent	<u> </u>	10. If changed, new Register	ed Agent/Office	
WHEELER, GEORGE T. 1440 CITRUS DR. WAUCHULA FL 33873		Name			
		Street Add	Street Address (P.O. Box Number is Not Acceptable)		
		Suite, Apt.	Suite, Apt. #, etc.		
		City		FL Zip Code	
10a. Pursuant to the provisions of sections 620.1051 and for the purpose of changing its registered office or agent. I am familiar with, and accept the obligation SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT MUS	registered agent, or both, in the is of section 620,192, Florida Str	e State of Florida. Such cha atules. TION, LIMITED	nge was authorized by its general partner(s). I he	reby accept the appointment of registered	
11. Name(s) of General Partner(s)		Each General Partner	11b. City, State & Zip Code	11c. Registration/ Document Number	
WHEELER, JANICE P	3711 OAK HILL		ZOLFO SPRINGS FL 3389		
			-01/21	40761 32 /9801124020 65.00 ****165.00	

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

I do hereby certify that the information supplied with this fifting 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 in Phalech

SIGN	IATU	JRE	4

Janice P. Wheeler

DATE 12-2997