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

Santira B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED SECAL DIRY OF STATE DIVISION OF COMPORATION

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1. Name of Limited Partnership	A14426	A14426				
VINTER PARK BUSINES	SS CENTER PHASE II, LTD	au-Ac				
Malling Address	Principal Office Address		3. Date Formed or Re	gistered	5a. Capita	Contributions as
154 WILSHIRE BLVD CASSELBERRY FL 32707	154 WILSHIRE BLVD CASSELBERRY FL 32707			ort	\$144,750.00	
2. Mailing Address	2a. Principal Office Address	2a. Principal Office Address		Formation	5b. Amount of Capital Contributions in FLORIDA to date	
Suite, Apt. #, etc. City & State	Suite, Apt #, etc City & State				Applied For Not Applicable	
Zip Country	Zip			Desired	\$8.75 Additional Fee Required	
		<u> </u>	8. Make check payabl	e to Dept of \$	state (See reve	se side for fee information
9. Name and Addre	ess of Current Registered Agent		10. If changed, n	ew Registered	Agent/Office	
MORLEY, PATRICK M. 154 WILSHIRE BLVD		Name Street Address (P.O. Box Number is Not Acceptable)				
CASSELBERRY FL 32707		Suite, Apt #, etc				
ONOGELDENNI TE 32/0/		1				
10a. Pursuant to the provisions of sections for the purpose of changing its registr	s 620.1051 and 620.192, Florida Statutes, the above-na ered office or registered agent, or both, in the State of R the philipathos of section 820.102 Evida Statutes	City arned limited partner forida. Such change	ship organized or registered under t was authorized by its general partr	he laws of the ner(s) I hereby	FL State of Florida accept the app	Zip Code a, submits this statement pointment of registered
10a. Pursuant to the provisions of sections for the purpose of changing its regist agent. I am familiar with, and accept SIGNATURE (Registered Agent Accepting App.	ered office or registered agent, or both, in the State of F the obligations of section 620 192, Florida Statutes.	amed limited partner Florida Such change	was authorized by its general partr	DATE_	State of Florida accept the ap	a, submits this statement pointment of registered
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