## 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** 

| Name | of   | Limited | Partnership     |
|------|------|---------|-----------------|
|      | Name | Name of | Name of Limited |

**DOCUMENT#** Ä18366

WINDMILL APARTMENTS LTD.

ar. DR

THED

98 OCT - 6 AM 8: 26

SECACEMAN OF SECTION TALLAHASSFE, FLORDA



| WINDWILL AI AITHILINIO, LID.   | 447  |   |                             |  |   |   |  |
|--|--|---|-----------------------------|--|---|---|--|
| alling Address Principal Office Address  |  | <del></del>   |                             | 3. Date Formed or Registered   | 5a. Capital Contributions as Shown on record. |   |  |
| 2 EATON STREET SUITE 1100  | 2 EATON STREET SUITE 1100  | SUITE 1100  |                             | 11/21/1984   | \$1,840,000.00                                |   |  |
| HAMPTON VA 23689   | HAMPTON VA 23669   |   |                             | 3a. Date of Lest Report  |   |   |  |
|  | ,  |   |                             | 12/30/1997   | 5b. Amo                                       | unt of Capital<br>ributions in FLORIDA<br>te: |  |
| 2. Mailing Address   | 2a. Principal Office Address   |   |                             | 4. State or Country of Formation   | to de   | te:   |  |
| Suite, Apt. #, etc.  | Suite, Apt. #. etc.  |   |                             | FL   |   |   |  |
|  |  |   | 6. FEI Number<br>59-2478513 |  | Applied For Not Applicable                    |   |  |
| City & State   | City & State   |   |                             | 7. Certificate of Status Desired   | \$8.75 Additional                             |   |  |
| Zip Country  | Zip Country  |   |                             | Fee Required  8. Make check payable to: Dept. of State (See reverse side for fee information |   |   |  |
|  |  |   |                             |  |   |   |  |
| 9, Name and Address of Gurrent Registered Agent  |  | 10. If changed, new Registered Agent/Office             |                             |  |   |   |  |
| CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324  |  | Name Street Address (P.O. Box Number is Not Acceptable) |                             |  |   |   |  |
|  |  | Sulte, Apl. #, etc.                                     |                             |  |   |   |  |
|  |  | City  |                             | •  | FL  | Zip Code                                      |  |
| SIGNATURE (Registered Agent Accepting Appointment)   | S A CORPORATION, L<br>BE REGISTERED AN   | IMITED  | PARTN                       | DATE.  |   | NESS ENTITY                                   |  |
| 11. Name(s) of General Partner(s)  | 11a. (Do NOT Use Post Office Bo  |   | 11b.                        | City, State & Zip Code   | 11c.  | Registration/<br>Document Number              |  |
| R.J. PROPERTIES, INC.  | 1400 · 66TH STREET NO  |   | ST. PETERSBURG FL           |  | 667885  |   |  |
|  |  |   |                             |  |   |   |  |
| SOMERSET PROP.INV. 84-IV   | 2 EATON ST., #1100   |   | Hami                        | PTON VA  | A1  | A18321  |  |
| <b>3</b>   |  | ·   |                             | <b>60</b> 00026<br>-10/13/5<br>****52  | 621<br>8010<br>6 25                           | 569<br>)17008<br>****526.25                   |  |
|  |  |   |                             |  |   |   |  |
| Note: General partners MAY NOT   | be changed on this form  | ı; an am  | endmen                      | t must be filed to cha   | ange a <b>g</b>                               | eneral partner.                               |  |
| 12. I do hereby certify that the information supplied with this Corporations from any liability of non-compliance with S this annual report is true and accurate and that my sign empowered to execute this report as required by chapter. | ection 119.07(3)(k) In the event that the inf<br>ature shall have the same legal effects as it | ormation supp   | lied is deemed              | exempt from public access. I further<br>entify that I am a General Partner of I              | certify that the                              | Information Indicated on                      |  |
| SIGNATURE  | Great Atlantic, as   | author  | ized aa                     | ent for DATE S   | ept. 2  | 39,98   |  |