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

LIMITED PARTNERSHIP ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

WINSTON PARK LTD.

1a. DOCUMENT # **A18810** 

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

97 MOV - 7 PH 1: 57



Aailing Address 11781 LEE JACKSON MEMORIAL HWY STE. #320 FAIRFAX VA 22033	Principal Office Address  11781 LEE JACKSON MEMORIAL HWY STE. #320 FAIRFAX VA 22033			<ol> <li>Date Formed or Registered</li> <li>01/09/1985</li> <li>Date of Last Report</li> <li>09/23/1996</li> </ol>	5a. Capital Contributions as Shown on record.  \$300.00  5b. Amount of Capital Contributions in FLORIDA to date:	
2. Mailing Address	2a. Principal Office Address	2a. Principal Office Address		4. State or Country of Formation		
Suite, Apt. #, etc.	Suite, Apt. #, etc.			6. FEI Number 52-1372859	Applied For Not Applicable	
City & State  Zip Country	City & State			7. Certificate of Status Desired		\$8.75 Additional Fee Required
			8. Make check payable to: Dopt. of State (See reverse side for fee informat			
9, Name and Address of Current Registered Agent Name			10. If changed, new Registered Agent/Office			
MUSS, JOSHUA A 8311 BOB-O-LINK DR. WEST PALM BEACH FL 33412  10a. Pursuant to the provisions of sections 620.1051 and 620.192. Florida Statutes, the above-nar		Street Address (P.O. Box Number Is Not Acceptable)  Suite, Apt. #, etc.  City  Lip Code  amed limited partnership organized or registered under the laws of the State of Florida, submits this statemen Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered				
agent. I am familiar with, and accept the obligations of the state of	alions of section 620.192, Florida Statutes.	LIMITED	PARTI	DATE NERSHIP OR OTHE		
1. Name(s) of General Partner(s)	11a. Address of Each Gener		11b.	City, State & Zip Code	11c.	Registration/ Document Number
MUSS, JOSHUA A.		11781 LEE JACKSON MEM		FAIRFAX VA		Social (Namber
				000002: -11/12: ****1!	3450 78701 56.25	38302 094005 ****156.25
				dec		

12. Ido hereby certify that the Information supplied with this filling 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 troe and securate 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 empowered to execute the first open as required by chapter 620, Florida Statutes.

SIGNATURE

ed Name of General Partner Signing Form TO SHUH A MUSS

DATE MV . 3, 199 /

CHZEUU3 (6/97)