## 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** 

1. Name of Limited Partnership

**DOCUMENT#** A19010

VILLAGE 56 ASSOCIATES, LTD.



TEFU DIVISION DE CERORATIONS

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VILL (01 00 7,000 0 ii 11 1 2 )				
Mailing Address  2957 W. STATE RD. 434 SUITE 300 P.O. BOX 915182 LONGWOOD FL 32779	Principal Office Address  2957 W. STATE RD. 434 SUITE 300 P.O. BOX 915182 LONGWOOD FL 32779		3. Date Formed or Registered 01/29/1985 3a. Date of Last Report 01/02/1998	5a. Capital Contributions as Shown on record \$20,000.00  5b. Amount of Capital Contributions in FLORIDA
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation FL	to date
Suite, Apt #, etc.  City & State	Suite, Apt #, etc  City & State		6, FEI Number 59-2559039	Applied For Not Applicable
Zip Country	Zip Country		7. Certificate of Status Desired  8. Make chick payable to Dept of	\$8.75 Additional Fee Required State (Sec reverse side for fee information)
9. Name and Address of	Current Registered Agent	Name	10. If changed, new Registore	d Agen∀Office
OSWALD, KENNETH F. 600 COURTLAND ST. SUITE 110 ORLANDO FL 32804		Street Address (F.O. Box Number Is Not Acceptable)  Suite, Apt. #, etc.		
10a. Pursuant to the provisions of sections 620 for the purpose of changing its registered or	1051 and 620 192, Florida Statutes, the above of flice or registered agent, or both, in the State of ligations of section 620 192, Florida Statutes			
SIGNATURE (Registered Agent Accepting Appointm A GENERAL PARTNER T	I, LIMITED P	DATE ARTNERSHIP OR OTHE	•	
	HIST DE DECISTEDEN	AND ACTIVE	WITH THIS OFFICE	

Name(s) of General Partner(s)

11.

11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)

11b. City, State & Zip Code 11c.

Registration/

EVANS, JERRY C.

206 SMOKERISE BLVD.

LONGWOOD FL

g mrio: \*\* afiffit... - aezre: 239 - 03000 - 003 - \*\*\*\*223,75 - \*\*\*\*228,75 ៦៩០០មី ទើ

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 Trelease 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 uired by chapter 620. Florida Statutes

SIGNATURE

Jerry C. Evans

Daytime Telephone Number 407/869-7533