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

1a. DOCUMENT # A19095

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 NOV 20 AM 8: 58

FERNANDINA BEACH RRH, LTD.				
Mailing Address	Principal Office Address	3. Date Formed or Registered	5a. Capital Contributions as Shown on record.	
		02/11/1005		

11635 NW 1ST AVE. GAINESVILLE FL 32607		11635 NW 1ST AVE. GAINESVILLE FL 32607		3a. Date of Last Report	\$0.00	
				11/26/1997	5b. Amount of Capital Contributions in FLORIDA	
		10		4. State or Country of Formation	to date:	
2. Mailing Address		2a. Principal Office Address		FL		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	·	6. FEI Number	Applied For	
City & State		City & State		59-2789964	Not Applicable	
				7. Certificate of Status Desired	S8.75 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 Current Registered Agent	10. If changed, new Registered Agent/Office
CURTIS, JOHN M.	Name
11635 N.W. 1ST AVENUE	Street Address (P.O. Box Number Is Not Acceptable)
GAINESVILLE FL 32607	Suite, Apt. #, etc.
	- City FL Zip Code

Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of 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 section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

_DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

MOOT DE REGIOTERED AND ACTIVE WITH THIS OFFICE.			
11. Name(s) of General Partner(s)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number
TURNEY, HENRY E. •	13504 NW 56TH AVE.	GAINESVILLE FL	
GRAY, STEVEN H.	125 NE 1ST AVE. #1	OCALA FL	
TRI-COUNTY BUILDERS CO.	11635 NW 1 AVE	GAINESVILLE FL	G91210000109
		9000027 -12/03/3 *****15	`ф1119—7 98-01006-022 50.00 ****,\$6.00

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. 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 630 Florida Statutes.

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onn W. Curzia, Partner

______ Daytime Telephone Number_

_{er} 352-332-0838

DATE 11-12-98

CR2E003 (8/98)