


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

LIMITED PARTNERSHIP ANNUAL REPORT 1998		 <p>FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS</p>		<p>FILED SECRETARY OF STATE DIVISION OF CORPORATIONS</p> <p>98 JAN -2 AM 9: 17</p>  <p><i>01/16</i></p>	
1. Name of Limited Partnership BROAD STREET INVESTORS LIMITED		1a. DOCUMENT # A19372			
Mailing Address 3100 UNIVERSITY BLVD. SOUTH SUITE 200 JACKSONVILLE FL 32216		Principal Office Address 3100 UNIVERSITY BLVD. SOUTH SUITE 200 JACKSONVILLE FL 32216		3. Date Formed or Registered 03/14/1985 3a. Date of Last Report 12/31/1996 4. State or Country of Formation FL 6. FEI Number 59-2523655 <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable 7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 8. Make check payable to: Dept. of State (See reverse side for fee information)	
2. Mailing Address Suite, Apt. #, etc. City & State Zip Country		2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country		5a. Capital Contributions as Shown on record \$1,465,596.00 5b. Amount of Capital Contributions in FLORIDA to date: \$1,465,596.00	

9. Name and Address of Current Registered Agent BROWN, GERALDINE G 3100 UNIVERSITY BLVD. SOUTH SUITE 200 JACKSONVILLE FL 32216		10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City Zip Code	
		<p style="text-align: center;"> 4000002405974--8 01/21/98--01070--021 ***541.25 ***541.25 </p> <p style="text-align: center;">FL</p>	

10a. 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) *Geraldine G. Brown*

DATE

12/22/97

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED 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
CAMVEST, INC. THE CLARKSON COMPANY	3100 UNIVERSITY BLVD 3100 UNIVERSITY BLVD.	JACKSONVILLE FL JACKSONVILLE FL	M71970 J69900

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 620, Florida Statutes.

SIGNATURE

Patricia H. Clarkson

DATE

12/23/97

Typed or Printed Name of General Partner Signing Form

Patricia H. Clarkson, V.P., CAMVEST INC.

Daytime Telephone Number

1-904-359-0045

CR2E003 (6/97)