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

DOCUMENT # **A19831**

OLD FIELDS, LTD.

98.AR

FILED 97 OCT 23 AM II: 39 SECRETARY OF STATE TALLAHASSEE, FLORIDA



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Mailing Address 1319 MICCOSUKEE ROAD FALLAHASSEE FL 32303	Principal Office Address 1319 MICCOSUKEE ROAD TALLAHASSEE FL 32303		3. Date Formed or Registered 05/02/1985 3a. Date of Last Report 11/25/1996	58. Capital Contributions as Shown on record. \$60,000.00 5b. Amount of Capital Contributions in FLORIDA to date:	
2. Mailing Address	28. Principal Office Address		4. State or Country of Formation	60,00D	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number NOT APPLICABLE	Applied For	
City & State Zip Country	City & State Zip Country		7. Certificate of Status Desired	Not Applicable \$8.75 Additional Fee Required	
		- V Ostriny		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			
HARVEY, CHARLES B.		Name			
1319 MICCOSUKEE RD. TALLAHASSEE FL 32303		Street Address (P.O. Box Number is Not Acceptable)			
		Suite, Apt. #, etc.			
		City		Zip Code	
agent. I am familiar with, and accept the oblig SIGNATURE (Registered Agent Accepting Appointmen A GENERAL PARTNER THA MU	AT IS A CORPORATION, I JST BE REGISTERED AN	LIMITED PAR ID ACTIVE W	DATE TNERSHIP OR OTHE	R BUSINESS ENTITY	
Name(s) of General Partner(s)	Address of Each Gener (Do NO1 Use Post Office B	tox Numbers) 11b.	City, State & Zip Code	11c. Registration/ Document Number	
HARVEY, CHARLES B.	1319 MICCOSUKEE RD		LLAHASSEE FL		
PENNINGTON, CARL R., JR.	3375-A CAPITAL CIRCLE	TA	LLAHASSEE FL 32308		
			200002 -10/28 ****\$	331182 C 79701026002 23.75 ****523.75	
Note General partners MAY N	OT be changed on this form	n; an amendm	ent must be filed to cha	ange a general partner	
12. I do heaby certify that the information supplied v Corporations from any liability of non-compliance this annual report is true and accurate and that n	with this filing is voluntarily furnished and does no with Section 119.07(3)(k) In the event that the in	ot qualify for the exemption	on stated in Section 119.07(3)(k), Florida emed exempt from public access. I furth	Statutes. I release the Division of er certify that the information indicated	

this annual report is true and accurate and that my signature shall have the same logal 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 this report as Squired by chapter 620, Florida Statutor