

**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	FILED JUN -7 PM 4:30 CLERK OF COURT 1000 BANK BUILDING FT. LAUDERDALE, FL 33301
1. Name of Limited Partnership PARKCREST APARTMENTS, LTD.		1a. DOCUMENT # A22281	
Mailing Address P.O. BOX 24943 FT. LAUDERDALE FL 33307-4943		Principal Office Address 150 NE 38TH ST. OAKLAND PARK FL 33334	
2. Mailing Address Suite, Apt. #, etc. City & State Zip Country		2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country	
3. Date Formed or Registered 03/27/1986		5a. Capital Contributions as Shown on record \$490,000.00	
3a. Date of Last Report 11/19/1997		5b. Amount of Capital Contributions in FL ORSIA to date ☐ Applied For ☒ Not Applicable	
4. State or Country of Formation FL		6. FEIN Number 59-2660145	
7. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		8. Make check payable to Dept. of State (See reverse side for fee information)	



9. Name and Address of Current Registered Agent BANTA, BRADFORD C. PARKCREST APTS. OFFICE 150 N.E. 38TH STREET OAKLAND PARK FL 33334		10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code	
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): A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.		DATE:	
11. Name(s) of General Partner(s) BANTA, BRADFORD C BANTA, CATHERINE M BANTA, MARY L	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 1409 MIDDLE RIVER DR. 1409 MIDDLE RIVER DR. 1425 MIDDLE RIVER DR.	11b. City, State & Zip Code FT. LAUDERDALE FL 333 FT. LAUDERDALE FL 333 FT. LAUDERDALE FL 333	11c. Registration Document Number

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)(g), 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 
 Typed or Printed Name of General Partner Signing Form: **BRADFORD C. BANTA**

DATE 12-11-98
Daytime Telephone Number 954-346-0755

CR2003 (8/98)