

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 OCT -3 AM 11:27



1. Name of Limited Partnership	1a. DOCUMENT # A22453
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EAGLE ISLAND, LTD.

Mailing Address 3824 S. FLORIDA AVE. LAKELAND FL 33813	Principal Office Address 3824 S. FLORIDA AVE. LAKELAND FL 33813	3. Date Formed or Registered 04/29/1986	5a. Capital Contributions as Shown on record. \$850,000.00
2. Mailing Address 2060 80 Foot Rd.	2a. Principal Office Address 2060 80 Foot Rd.	3a. Date of Last Report 10/01/1996	5b. Amount of Capital Contributions in FLORIDA to date:
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. State or Country of Formation IL	
City & State Bartow, FL	City & State Bartow, FL	6. FEI Number 36-3435831	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip 33830	Zip 33830	7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Country PAK	Country PAK	8. Make check payable to: Dept. of State (See reverse side for fee information)	

9. Name and Address of Current Registered Agent HALL, W. GARVE 3824 S. FLORIDA AVE. LAKELAND FL 33803	10. If changed, now Registered Agent/Office Name Same Street Address (P.O. Box Number Is Not Acceptable) 2060 80 Foot Rd. Suite, Apt. #, etc. City Bartow FL Zip Code 33830
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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)

DATE

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) CITRUS PARTNERS, LTD.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 3824 S. FLORIDA AVE. 2060 80 Foot Rd.	11b. City, State & Zip Code LAKELAND-FL Bartow, FL 33830	11c. Registration/Document Number A18048 7000002313827--5 -10/07/97--01047--023 ****437.50 ****437.50 7000002313827--5 -10/07/97--01047--024 ****103.75 ****103.75 Dec
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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

W. Garvie Hall

DATE **9/8/97**

Typed or Printed Name of General Partner Signing Form

W. Garvie Hall

Daytime Telephone Number

941-537-2446

CR2E003 (6/97)