FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

Typed or Printed Name of General Partner Signing Form

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		SECRETARY DIVISION OF 23	DM 10 - EQ \	
1. Name of Limited Partnership	1a. DOCUMENT # A22662			11/25	
BRANDON CROSSINGS, LTD.					
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.	
P.O. BOX 22550 ST. PETERSBURG FL 33742	11300 4TH STREET NORTH SUITE 200 ST. PETERSBURG FL 33716		06/04/1986 3a. Date of Last Report	\$99.00	
			09/29/1997 4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:	
2. Mailing Address	2a. Principal Office Address		FL		
Suite, Apt. #, etc. City & State	Suite, Apt. #, etc. City & State		6. FEI Number 59-2708246	Applied For Not Applicable	
City & State			7. Certificate of Status Desired	\$8.75 Additional Fee Required	
Zip Country	Zip Country		8. Make check payable to: Dept. of S	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					
SEMBLER DEVELOPERS, INC.		Name			
11300 4TH STREET NORTH	Street A		ass (P.O. Box Number Is Not Acceptable)		
SUITE 200	Suite, Apt. #				
ST. PETERSBURG FL 33716	City			FL Zip Code	
10a. Pursuant to the provisions of sections 620.1051 and 620.1051 and 620.1052, 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.					
11. Name(s) of General Partner(s)	11a. Address of Each General (Do NOT Use Post Office Box		b. City, State & Zip Code	11c. Registration/ Document Number	
SEMBLER DEVELOPERS, INC.	11300 4TH STREET NORT		ST. PETERSBURG FL 337	K82527	
\$		**************************************	2000027 -12/03/1 *****15	02552-5 38-01103-004 0.00 **** 141.35	
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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 regulired by chapter 620. For ida Statutes.					

Daytime Telephone Number