## 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 DEPARTA Sandra B. N Secretary of DIVISION OF COM	<b>fortham</b> f State	FILE:		
1. Name of Limited Partnership	1a. DOCUME <b>A23215</b>	NT#	SECRETARY O		
VICTORIA POINT ASSOCIATES, LTD.					
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.	
1412 WEST COLONIAL DRIVE ORLANDO FL 32804	1412 WEST COLONIAL DRIVE ORLANDO FL 32804		09/11/1986 3a. Date of Last Report	\$1,150,000.00	
2. Mailing Address	2a. Principal Office Address	77	01/05/1998 4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:	
Suite Apt. #, etc. City & State  City & State	Suite, Apt.#.jetc.  City & Glate	KA.	FL 6. FEI Number 06-1203209	Applied For Not Applicable	
32789 Country USA	Wink- Park 232789	ountry USA	7. Certificate of Status Desired  8. Make check payable to: Dept. of St	\$8.75 Additional Fee Required	
9. Name and Address of Current Re	gistered Agent	·	10. If changed, new Registered A	gent/Office	
LECESSE DEVELOPMENT CORPORATION 1412 WEST COLONIAL DRIVE ORLANDO FL 32802		Street Address (P.O. Bo Sults, Apt. #, etc.)	SSC DE BLOOP  X Number Is Not Acceptating)  28  Pak	FL 33789	
10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the late 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) agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.					
SIGNATURE (Registered Agent Accepting Appointment) 4 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7			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)	11a. Address of Each General F (Do NOT Use Post Office Box		City, State & Zip Code	11c. Registration/ Document Number	_
LECESSE DEVELOPMENT CORPORAT	1412 WEST COLONIAL DR	ORI	ANDO FL		CR2E003 (8/98)
			0000027 -01/28/ ****52		さ
Note: General partners MAY NOT b	e changed on this form;	an amendme	nt must be filed to char	nge 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 angual 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 IN THUE DATE WAS SELECTIVE SIGNATURE WAS SELECTIVE SELECTIVE SIGNATURE					