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

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LIMITED PARTNERSHIP ANNUAL REPORT 1999	FLORIDA DEPARTA Sandra B. R Secretary of DIVISION OF CO	flortham of State	FILED 98 NOV -9 PH 12:	: 49
1. Name of Limited Partnership	1a. DOCUMENT # A23411		SECRETARY OF S TALLAHASSEE FL	TATE ORIDA
GENEVA ASSOCIATES, LTD.				
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.
-728 OWENS ROAD YULEE FL 32097	J26 OWENS RO AD YULEE FL 32097		10/10/1986 3a. Date of Last Report	\$990.00
			11/21/1997 4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:
38230 were Road	2a. Principal Office Addressy 3873 Culcus Road		FL	is date.
Suite, Apt. #, etc.			6. FEI Number	Applied For
City & State	City & State		59-2805232 7. Certificate of Status Desired	Not Applicable
	Zip Country		<u>-</u>	\$8.75 Additional Fee Required tate (See reverse side for fee information)
9. Name and Address of Current Registered Agent			10. If changed, new Registered	Agent/Office
		Name		
HENDERSON, J. GROVER -726 OWENS ROAD YULEE FL 32097		Street Address (P.O. Box Number Is Not Acceptable) 5335 (WWW KDAC) Suite, Apt. #, etc.		
I GEEL I L GEGG		City FL 310972145		
10a. Pursuant to the provisions of sections 620.1051 and 620 for the purpose of changing its registered office or registe agent. I am familiar with, and accept the obligations of sections of sections (Registered Agent Accepting Appointment)	ered agent, or both, in the State of Florida			State of Florida, submits this statement
A GENERAL PARTNER THAT IS MUST E	A CORPORATION, LI BE REGISTERED AND			R BUSINESS ENTITY
11. Name(s) of General Partner(s)	11a. Address of Each General I	Partner 11b.	City, State & Zip Code	11c. Registration/ Document Number
CORDCON CAPITAL CORP.	-726 OWENS ROAD		ILEE FL	G17202
Î	3913 Owers Road	32	-11/17/	3896864 3801064018 11.25 ****141.25

CR2E003 (8/98)

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 flability 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 reports 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 regarded by chapter 620, Florida Statutes.

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

Typed or Printed Name of General Partner Signing For Dellan Capital Corp. By Taxamu A Say Daytime Telephone Number 212-410-7555