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

1. Name of Limited Partnership

DOCUMENT # Ä25212

97 DEC 16 PH 4: 66

SECKETARY OF JALIE TALLAHASSEE, FLORIOA



ZOM YOUNG PINE, LTD.				HIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	
Mailing Address	Principal Office Address _ 2269_LEE_RD. WINTER-PARK-FL-32789		3. Date Formed or Registered 09/23/1987	5a. Capital Conflibutions as Shown on record	
WINTER PARK FL 32789.			01/03/1997 5b. A	\$4,009,000.00 5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address 1950 Summit Park Drive	2a. Principal Office Address 1950 Summit Park Drive		4. State or Country of Formation	to date:	
Suite Apt. #_etc. Suite 300 City & State	Suite, Apl. #, etc. Suite 300 City & State		6. FEI Number 59-2827315	Applied For Not Applicable	
Orlando, FL Zip Country	Orlando, FL	Country	7. Certificate of Status Desired	\$8.75 Additional Fee Required	
32810	32810	•	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		
ERIC F. BOSCHMANS		Street Address	Name Eric F.J. Boschmans Street Address (P.O. Box Numbor Is Not Acceptable)		

 Name and Address of Current Registered Agent 	10, If changed, new Registered Agent/Office			
ERIC F. BOSCHMANS	Eric F.J. Boschmans			
TT2269 LEE RD. TWINTER PARK FL 32789	Street Address (P.O. Box Numbor Is Not Acceptable) 1950 Summit Park Drive Suite Act #, etc 300			
	Citorlando FL Zip Code 10			

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 Statules

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 Partnor(s)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number
, ZOM PROPERTIES, INC.	2209 LEE RD. 1950 Summit Park Drive Suite 300	WINTER PARK FL Orlando, FL 32810	613657
		1000023 -12/19/	780819

****541.25 ****541.25

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 it 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 turther 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 610. Florida Statutes.

SIGNATURE __

Samue1' Typed or Printed Name of General Partner Signing Form

III, PResident

Daytime Telephone Number

(407) 644-6300