FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP **ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE

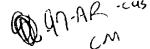
Sandra Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

n. DOCUMENT # **A25227**

STONEGATE MANOR, LIMITED



FILED

95 OCT 23 AHTH: 28

SECRETARY OF SHARE TALLAHASSEE, FLORIDA



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|---|---|--|---|--|--|--|--|
| Maling Address 20721 S.W. 46TH AVE. | Principal Office Address 20721 S.W. 46TH AVE. | Principal Office Address | | 3. Date Formed or Registered 09/25/1987 3a. Date of Last Report 10/27/1995 4. State or Country of Formation | | 5a. Capital Contributions as Shown on record \$274,321.00 5b. Aniount of Capital Contributions in Ft ORIDA to date \$274,321. | |
| NEWBERRY FL 32669 | NEWBERRY FL 32669 | | | | | | |
| | | | | | | | |
| 2. Mailing Address | 2a. Principal Office Address | 2a. Principal Office Address | | | | | |
| | 0.00 0.00 | Come And Walls | | FL | 402 | 14,321.00 | |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | Suite, Apt. #, etc. | | 5, FEI Number 59-2967386 | Applied For Not Applicable | | |
| City & State | City & State | City & State | | 7. Certificate of Status Desired | | \$8.75 Add tional | |
| Zip Country | Ζιρ | Zip Country | | 8. Make check payable to Dept of State (See reverse side for fee information | | | |
| | | | | G. Wake Check payable to Dept. | | | |
| 9. Name and Address of Current Registered Agent | | | 10. If changed, new Reg stered Agent/Office | | | | |
| DAVIS, NORITA V. | | Name | | | | | |
| 20721 S.W. 46TH AVE. | | Street Address (P.O. Box Number Is Not Acceptable) | | | | | |
| NEWBERRY FL 32669 | | Suite, Apt #, etc | | | | | |
| | | City | | | FL | Zip Code | |
| SIGNATURE (Registered Agent Accepting Appointm A GENERAL PARTNER TH | | I, LIMITED | PARTN VE WITH | DATE IERSHIP OR OTHE I THIS OFFICE. | | NESS ENTITY | |
| 11. Name(s) of General Partner(s) | 11a. (Do NOT Use Post Office | | 11b. | City, State & Zip Code | 11c. | Registration/ Document Number | |
| DAVIS, RONNIE C. | VIS, RONNIE C. 20721 SW 46TH AVE. | | NEWBERRY FL 32669 | | | | |
| • | | | } | 500001 -10/3 **** | .991! 1/960 58\$.00 | 5458 1008004 ****200.00 | |
| Note: General partners MAY | NOT be allowed on this fa | | | | | | |
| Corporations from any liability of non-complian | // | | | | | | |
| this annual report is true and accurate and the empowered to execute this report as required | ed with this filing is voluntarily furnishes/and doi nge with Section 19 07(3)(k) in the event that to allow signature shall have the parnolegal effect | es not qualify for the | e exemption st plied is deen e | ated in Section 119.07(3)(k), Florid developt from public access 1 for centry that I and General Partner | la Statutes Tirel ther certify that of the limited p | ease the Division of the information indicated on arthership receiver or trustee | |
| this annual report is true and accurate and that | ed with this filing is voluntarily furnishes/and doi nge with Section 19 07(3)(k) in the event that to allow signature shall have the parnolegal effect | es not qualify for the | e exemption st plied is deen e | ated in Section 119.07(3)(k), Florid developt from public access 1 for centry that I and General Partner | la Statutes Tirel ther certify that of the limited p | ease the Division of the Information indicated on artnership receiver or trustee | |