FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1998



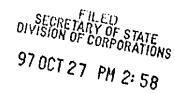
FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # A26526





SARASOTA LAKESIDE CLUB LIMITED PARTNERSHIP

				 		
Mailing Address	Principal Office Address			3. Date Formed or Registered	58. Capital Contributions as Shown on record.	
C/O FORWARD MANAGEMENT.INC.	C/O FORWARD MANAGEMENT,INC.			06/08/1988	\$0.00	
110 S.BROOKS ST.	110 S.BROOKS ST.		1	38. Date of Last Report	40.00	
MADISON WI 53715	MADISON WI 53715			10/14/1996	5b. Amount of Capital	
	-			4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:	
2. Malling Address	2a. Principal Office Address			WI		
Suite, Apt. #, etc.	Sulte, Apt. #, etc.			6. FEI Number	<u> </u>	
				39-1627560	Applied For	
City & State	City & State			· · · · · · · · · · · · · · · · · · ·	Not Applicable	
Zip Country	Zip Country			7. Certificate of Status Desired	\$8.75 Additional Fee Required	
Zip Country	Doundy Dounds			8. Make check payable to: Dept. of State (See reverse side for fee Information)		
				· · · · · · · · · · · · · · · · · · ·		
9. Name and Address of Current Re				10. If changed, new Registered Agent/Office		
WEAVER, KATHY		Name				
4325 407H ST., W.		Street Addre	ddress (P.O. Box Number 5) 10 45 45 45 45 2 3 2 3 2 3 3 1 3 7			
		Suite, Apt. #.	PL#, etc10/29/9701101004			
<u> </u>			*, etc. ****156.25 ****156.25			
City			FL Zip Code			
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 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 Partner (Do NOT Use Post Office Box Numbers)		11b.	City, State & Zip Code	11c. Registration/	
FARR, THOMAS G.	110 SO BROOKS ST		MADISON WI			
FIRST MADISON CORP-88	617 N. SEGOE RD. STE		MADISON WI		F93000001617	
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Note: Constal partners MAV NOT be changed on this form; an amandment must be filed to change a general partner						

do hereby certily 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. Further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report is true and accurage 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 is required by chapter 670, Florida Statutes.