


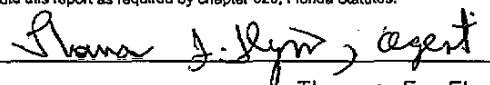


FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 98 DEC 28 AM 9:42 unth 1/12	
1. Name of Limited Partnership GARDENIA STREET VILLAS, LTD.		1a. DOCUMENT # A26755			
Mailing Address 2424 ENTERPRISE ROAD, SUITE G CLEARWATER FL 33763 US		Principal Office Address 2424 ENTERPRISE ROAD, SUITE G CLEARWATER FL 33763 US		3. Date Formed or Registered 07/19/1988 3a. Date of Last Report 02/02/1998 4. State or Country of Formation FL	
2. Mailing Address 516 Lakeview Road Suite, Apt. #, etc. Unit 8 City & State Clearwater, Florida Zip Country USA 33756 Pinellas		2a. Principal Office Address 516 Lakeview Road Suite, Apt. #, etc. Unit 8 City & State Clearwater, Florida Zip Country USA 33756 Pinellas		5a. Capital Contributions as Shown on record. \$100.00 5b. Amount of Capital Contributions in FLORIDA to date: <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable 7. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required 8. Make check payable to: Dept. of State (See reverse side for fee information)	
9. Name and Address of Current Registered Agent FLYNN MANAGEMENT CORPORATION 2424 ENTERPRISE ROAD, SUITE G CLEARWATER FL 33763		10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) 516 Lakeview Road Suite, Apt. #, etc. Unit 8 City Clearwater FL Zip Code 33756			
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 Statutes. SIGNATURE (Registered Agent Accepting Appointment)  DATE 10/28/98					
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) SHUBERT, JACK		11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 363 BRASSIE DR		11b. City, State & Zip Code LONGWOOD FL 32750	
				11c. Registration/Document Number 600002739456--2 -01/13/99--01037--019 ****150.00 ****150.00	
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 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 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 620, Florida Statutes.					
SIGNATURE 		DATE 10/28/98			
Typed or Printed Name of General Partner Signing Form		Thomas F. Flynn, Agent		Daytime Telephone Number 727-449-1182 X 211	

CR2E003 (9/98)