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

1. Name of Limited Partnership

1a. DOCUMENT # **A26951**

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 NOV -2 'AM 11: 25

PDI ST. LUCIE I LIMITED PARTNERSHIP					
Mailing Address C/O PIZZUTI DEVELOPMENT, INC. 250 EAST BROAD STREET, SUITE 1900	Principal Office Address C/O PIZZUTI DEVELOPMENT, INC. 250 EAST BROAD STREET, SUITE 1900		3. Date Formed or Registered 08/26/1988 3a. Date of Last Report	5a. Capital Contributions as Shown on record. \$2,814,583.00	
COLUMBUS OH 43215 2. Mailing Address	2a. Principal Office Address		01/02/1998 4. State or Country of Formation OH	5b. Amount of Capital Contributions in FLORIDA to date:	
Suite, Apt. #, etc. City & State	Suite, Apt. #, etc. City & State		6. FEI Number 31-1250342 7. Certificate of Status Desired	Applied For Not Applicable	
Zip Country	Zip Country		8. Make check payable to; Dept. of State (See reverse side for fee information)		
9. Name and Address of Current Re	gistered Agent		10. If changed, new Registered.	Agent/Office	
CINDACIZ IZENNICTU D		Name			
SIMBACK, KENNETH P 255 S. ORANGE AVENUE		Street Address (P.O. Box Number Is Not Acceptable)			
SUITE 1350	Suite, Apt. #, et				
ORLANDO FL 32801		City	Zip Code		
		Ony	FL		
10a. Pursuant to the provisions of sections 620, 1951 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 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 (Do NOT Use Post Office Box	Partner Numbers) 11b.	City, State & Zip Code	11c. Registration/ Document Number	
PIZZUTI DEVELOPMENT, INC	250 E. BROAD STREET,		LUMBUS OH	P03309	03 (0/30)
			900002 -11/09 ****5	6815390 ⁸ 59801089017 26.25 ****526.25	עקקער
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		
Typed or Printed Name of General Partner Signing Form	AMES PCEAME	٠ .	Daytime Telephone Number6/1	4 280-4000	