


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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 DEC 14 PM 1:29:28

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with
12/18



LIMITED PARTNERSHIP ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
1. Name of Limited Partnership HOPEWELL LAND PARTNERS, LTD.		1a. DOCUMENT # A27086	
Mailing Address POST OFFICE BOX 112 WINTER HAVEN FL 33882 US	Principal Office Address 250 SECOND STREET SOUTHWEST WINTER HAVEN FL 33880	3. Date Formed or Registered 09/21/1988	5a. Capital Contributions as Shown on record. \$10.00
2. Mailing Address		2a. Principal Office Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	3a. Date of Last Report 12/18/1997	5b. Amount of Capital Contributions in FLORIDA to date:
City & State	City & State	4. State or Country of Formation FL	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip	Country	6. FEI Number 59-2946337	7. Certificate of Status Desired
		<input 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 BARTOW MINING, INC. 305 SECURITY WINTER HAVEN FL 33880	10. If changed, new Registered Agent/Office
	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. 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 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 _____

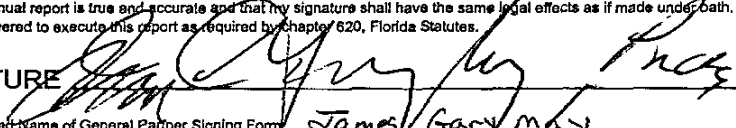
**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number
BARTOW MINING, INC.	250 SECOND STREET, SO	WINTER HAVEN FL 33882	M99568
ASF ACQUISITION, INC.	250 SECOND STREET, SO	WINTER HAVEN FL 33882	V01347

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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 12/3/98
Typed or Printed Name of General Partner Signing Form James Gary Moxey Daytime Telephone Number 941-294-0993

CR2E003 (8/98)