



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

LIMITED PARTNERSHIP ANNUAL REPORT 1998		 <p>FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS</p>		<p>FILED SECRETARY OF STATE DIVISION OF CORPORATIONS</p> <p>97 OCT -3 AM 11:27</p> 	
1. Name of Limited Partnership BLUE HERON GROVES, LTD.		1a. DOCUMENT # A28196			
2. Mailing Address 3824 S. FLORIDA AVENUE LAKELAND FL 33813		2a. Principal Office Address 3824 S. FLORIDA AVENUE LAKELAND FL 33813		3. Date Formed or Registered 04/12/1989 3a. Date of Last Report 10/01/1996 4. State or Country of Formation FL 5a. Capital Contributions as Shown on record \$12,112,500.00 5b. Amount of Capital Contributions in FLORIDA to date:	
2. Mailing Address 2060 80 Foot Rd. Suite, Apt. #, etc.		2a. Principal Office Address 2060 80 Foot Rd. Suite, Apt. #, etc.		6. FEI Number 59-2941463 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable 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)	
City & State Bartow, FL Zip 33830		City & State Bartow, FL Zip 33830		Country POLK	
9. Name and Address of Current Registered Agent HALL, W. GARVIE 3824 S. FLORIDA AVENUE LAKELAND FL 33813			10. If changed, new Registered Agent/Office Name: Same Street Address (P.O. Box Number Is Not Acceptable): 2060 80 Foot Rd. Suite, Apt. #, etc.: City: Bartow FL Zip Code: 33830		
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) CITRUS PARTNERS, LTD.		11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 3824 S. FLORIDA AVENUE 2060 80 Foot Rd.		11b. City, State & Zip Code LAKELAND FL Bartow, FL 33830 100002313931-3 -10/07/97-01047-025 ****103.75 ****103.75 100002313931-3 -10/07/97-01047-026 ****437.50 ****437.50 dec	
11c. Registration/Document Number A18048					
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: <i>W. Garvie Hall</i> DATE: 9/8/97 Typed or Printed Name of General Partner Signing Form: W. Garvie Hall Daytime Telephone Number: 941-537-2446					

CR2E003 (6/97)