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

LIMITED PARTNERSHIP ANNUAL REPORT 1999

ZOM OSCEOLA COMMERCIAL, LTD.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

SIGNATURE\_

Typed or Printed Name of General Partner Signing Form

1a. DOCUMENT # **A28423** 

Bettex 1019/98

SECRETARY OF STATE DIVISION OF CORPORATIONS

98 OCT 12 AMI1: 22

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407 644 6300

Daytime Telephone Number\_

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Malling Address	Principal Office Address  1950 SUMMIT PARK DRIVE SUITE 300 ORLANDO FL 32810		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.
1950 SUMMIT PARK DRIVE			06/02/1989	
SUITE 300 ORLANDO FL 32810			3a. Date of Last Report 12/08/1997	
ONEMINEO TE SEGIO	CHEMINDO LE SEGIO	ONDARDO TE GEORG		5b. Amount of Capital Contributions in FLORIDA
2. Mailing Address 28. Principal Office Address		4. State or Country of Formation	to date:	
			FL	
Suite, Apt. #, etc.	Sulte, Apt. #, etc.		6, FEI Number	Applied For
City & State	City & State		59-2947647	Not Applicable
				\$8.75 Additional Fee Required
Zip Country	Zip	Zip Country		State (See reverse side for fee information)
9. Name and Address of Current Registered Agent		10. If changed, new Registered Agent/Office		
BOSCHMANS, ERIC F		Name ERIC F. BOSCH MANS		
2000 LEE-ROAD		Street Agdress (P.O. Box Number is Not Acceptable) 1950 SUMMIT BARK DRIVE		
WINTER PARK-FL-92789		Suite, Apt. 4, etc. SUITE 300		
		City Zip Code		
OKU		1000	FL 32810	
Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the lews 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 600.102, Florida Statutes.				
SIGNATURE (Registered Agent Accepting Appointment)	Mann	N	DATE	8/10/198
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. (Do NOT Use Post Office B	al Partner ox Numbers) 1	1b. City, State & Zip Code	11c. Registration/ Document Number
ZOM PROPERTIES, INC.	1950 SUMMIT PARK DRI	v	ORLANDO FL 32810	613657
			000002 -10/19 ****\$	<b>66405</b> 0—8 (5788— <b>01</b> 002—005 3788— <b>01</b> 002—005 38,25 ****526,25
			dee	
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.				
12. I do hereby certly that the information supplied with this filing is voluntably 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.				

Samuel C. Stephens, III, President