

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

LIMITED PARTNERSHIP ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 SEP 29 PM 3:35

1. Name of Limited Partnership FOREST CLUB OF WELLINGTON, LTD.	1a. DOCUMENT # A28639
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2. Mailing Address 711 FOREST CLUB DR. W. WEST PALM BEACH FL 33414 US	2a. Principal Office Address C/O WILSHIRE INTERNATIONAL REALTY 155 WORTH AVE. #9 PALM BEACH FL 33480 US
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3. Date Formed or Registered 07/11/1989	5a. Capital Contributions as Shown on record. \$650,000.00
3a. Date of Last Report 09/27/1996	5b. Amount of Capital Contributions in FLORIDA to date:
4. State or Country of Formation FL	6. FEI Number 65-0127517
7. Certificate of Status Desired <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	\$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 STANLEY, FRANKS C/O WILSHIRE INTERNATIONAL REALTY 155 WORTH AVE. #9 PALM BEACH FL 33480
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10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City	Zip Code FL
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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) WILSHIRE INTERNATIONAL REALT	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 155 WORTH AVE. #9	11b. City, State & Zip Code PALM BEACH FL 33480	11c. Registration/Document Number F01347
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800002310648-9
-10/02/97-01116-22
***550.00 ***550.00

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 _____

Typed or Printed Name of General Partner Signing Form _____

CHRISTINE FRANKS

Daytime Telephone Number _____

561-835-8001

CR2E003 (6/97)