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

LIMITED PARTNERSHIP ANNUAL REPORT 1999



MIDLAND PROPERTIES LIMITED PARTNERSHIP VII

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # **A29948**

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA



3. Date Formed or Registered Capital Contributions as Shown on record. Principal Office Address Mailing Address 04/17/1990 33 NORTH GARDEN AVENUE. SUITE 1200 33 NORTH GARDEN AVENUE. SUITE 1200 \$1,090,000.00 CLEARWATER FL 33755 CLEARWATER FL 33755 3a. Date of Last Report 12/17/1997 5b. Amount of Capital Contributions in FLORIDA to date: 4. State or Country of Formation 2. Mailing Address 2a. Principal Office Address FL Suite, Apt. #, etc. Suite, Apt. #, etc. 6. FEI Number Applied For Not Applicable 59-3009366 City & State City & State 7. Certificate of Status Desired \$8.75 Additional Fee Required Zip Country Country 8. Make check payable to: Dept. of State (See reverse side for fee information) 9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office MIDLAND FINANCIAL HOLDINGS, INC. Street Address (P.O. Box Number S.Not Acceptable) 02740309 33 NORTH GARDEN AVENUE, SUITE 1200 01/13/99--01076 --019 Suite Ant # etc. **CLEARWATER FL 33755** ****526. City 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) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. Address of Each General Partner Registration/ 11. Name(s) of General Partner(s) 11a. (Do NOT Use Post Office Box Numbers) 11b. City, State & Zip Code 11c. Document Number MIDLAND FINANCIAL HOLDINGS, 33 NORTH GARDEN AVENU **CLEARWATER FL 33755** K22808 Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner. 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 regulated by chapter 620, Florida Statutes. SIGNATURE. Mathis, President Typed or Printed Name of General Partner Signing Form