

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

LIMITED PARTNERSHIP ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
1. Name of Limited Partnership EAGLETON HOMES VENTURE, LTD.		1a. DOCUMENT # A31045 <i>99-AB/cus</i> <i>CM</i>	
Mailing Address 1555 PALM BEACH LAKES BLVD., SUITE 1100 WEST PALM BEACH FL 33401		Principal Office Address 1555 PALM BEACH LAKES BLVD., SUITE 1100 WEST PALM BEACH FL 33401	
2. Mailing Address		2a. Principal Office Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip Country		Zip Country	

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
JUN 27 PM 2:45



3. Date Formed or Registered 01/07/1991	5a. Capital Contributions as Shown on record \$10,000.00
3a. Date of Last Report 12/01/1997	5b. Amount of Capital Contributions in FL ORCA to date \$10,000.00**
4. State or Country of Formation FL	☐ Applied For ☐ Not Applicable
6. FEI Number 65-0237519	7. Certificate of Status Desired ☒ \$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 ECCLESTONE, E. LLWYD, JR. 1555 PALM BEACH LAKES BLVD., SUITE 1100 WEST PALM BEACH FL 33401
--

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) EAGLETON HOMES COMPANY PGA GOLF CLUB OF FLORIDA, IN	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 1555 PALM BEACH LAKES 1555 PALM BEACH LAKES	11b. City, State, & Zip Code WEST PALM BEACH FL 33 WEST PALM BEACH FL 33	11c. Registration Document Number L97692 K15080
--	--	---	--

7070549
400002765554-3
-0270549-01018-005
****167.50 ****167.50

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 _____
Typed or Printed Name of General Partner Signing Form: Ron Cooper

DATE 12/14/98
Daytime Telephone Number: 561/686-2000

CR2E003 (8/98)