## 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

1. Name of Limited Partnership

**DOCUMENT #** A31138

RENAISSANCE RETIREMENT LTD.

Typed or Printed Name of General Partner Signing Form



FILED 98 FEB -2 AM 9: 33 SECRETARY OF STATE TALLAHASSEE, FLORIDA



Malling Address	Principal Office Address		3. Date Formed or Registered	<b>5a.</b> Capital Contributions as Shown on record.	
9000 lake forrest dr. Ste 200	6000 LAKE FORREST DR. STE 200 ATLANTA GA 30328		01/30/1991 3a. Date of Last Report	\$25,000.00  5b. Amount of Capital Contributions in FLORIDA	
ATLANTA GA 30328			10/25/1996		
2. Mailing Address	28. Principal Office Address		4. State or Country of Formatio	n to date	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 59-2989150	Applied For	
City & State	City & State		7. Certificate of Status Desired	Not Applicable  \$8.75 Additional	
Zip Country	Zip Country			Fee Required  8. Make check payable to: Dept. of State (See reverse side for fee informat	
9. Name and Address of Cu	rrent Registered Agent		10. If changed, new Regis	lered Agent/Office	
BROGDON, CHRIS 1800 HARRISON ST #305 TITUSVILLE FL 32780		Name			
		Street Address (P.O. Box Number Is Not Acceptable)  Suite, Apt. #, etc.			
		City Zip Code			
	51 and 620 192, Florida Statutes, the above-nam			of the State of Florida, submits this statemer	
for the purpose of changing its registered office agent. I am familiar with, and accept the oblig signature (Registered Agent Accepting Appointment)	ce or registered agent, or both, in the State of Flations of section 620.192, Florida Statules.	orida. Such chan	go was authorized by its general partner(s). I	of the State of Florida, submits this statement hereby accept the appointment of registered	
for the purpose of changing its registered office agent. I am familiar with, and accept the oblig SIGNATURE (Registered Agent Accepting Appointment A GENERAL PARTNER TH.	ce or registered agent, or both, in the State of Flations of section 620.192, Florida Statules.	orida. Such chan	go was authorized by its general partner(s). I	of the State of Florida, submits this statemen hereby accept the appointment of registered	
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for the purpose of changing its registered officegent. I am familiar with, and accept the oblig signature (Registered Agent Accepting Appointment A GENERAL PARTNER TH. MI	AT IS A CORPORATION,  JST BE REGISTERED AN  Address of Each Gene  (Do NOT Use Post Office E	LIMITED VD ACTIV rai Partner 30x Numbers)	PARTNERSHIP OR OTHER STATES OF THE STATES OF	of the State of Florida, submits this statement hereby accept the appointment of registere ATE  HER BUSINESS ENTITY  11c. Registration/ Document Number	
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for the purpose of changing its registered officegent. I am familiar with, and accept the oblig SIGNATURE (Registered Agent Accepting Appointment A GENERAL PARTNER TH. M. Name(s) of General Partner(s)	ce or registered agent, or both, in the State of Fivations of section 620-192, Florida Statules.  AT IS A CORPORATION,  JST BE REGISTERED AN  Address of Each General (Do NOT Use Post Office 6	LIMITED ND ACTIV	PARTNERSHIP OR OTHER WITH THIS OFFICE.  11b. City, State & Zip Code  ATLANTA GA 30328	of the State of Florida, submits this statement horeby accept the appointment of registered the submits this statement horeby accept the appointment of registered the submits appointme	