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

DOCUMENT# A31197

FILED 98 DEC 17 PM 4: 30 SECRETARY OF STATE TALLAHASSEE, FLORIDA

THE BLAKEWOOD MORTGAGE								
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.				
3235 SW 62ND LANE GAINESVILLE FL 32608	3235 SW 62ND LANE GAINESVILLE FL 32608		02/14/1991 3a. Date of Last Report 12/26/1997	\$22,292.00 5b. Amount of Capital Contributions in FLORIDA to date:				
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	10 date:				
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 59-3046075	Applied For Not Applicable				
City & State	City & State		7. Certificate of Status Desired	\$8.75 Additional				
Zip Country Zip		Country	8. Make check payable to: Dept. of S	Fee Required				
			G, Moto diode payable to bept to	Same (Coo to to to to the short allow)				
9. Name and Address of Current Registered Agent			10. If changed, new Registered Agent/Office					
BLAKEWOOD, STEPHEN W		Name						
3235 SOUTHWEST 62ND LANE		Street Address (P.O. Box Number Is Not Acceptable)						
GAINESVILLE FL 32608	Suite, Apt.		1000027326411 -01/07/9901007004					
		City	****873.50 ************************************					
10a. Pursuant to the provisions of sections 520.1051 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, 1 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)	11a. Address of Each General	Partner 11b	City, State & Zip Code	11c. Registration/ Document Number				
BLAKEWOOD, STEPHEN W	3235 SW 62ND LANE		AINESVILLE FL					
BLAKEWOOD, SALLY K	3235 SW 62ND LANE		AINESVILLE FL	1 Of 14 18				
				Short A				
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.								
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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.

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