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

1a. DOCUMENT # **A31210**

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 SEP 16 PM 3: 53

	A31210			
PONTE VEDRA CLUB APART	MENTS, LTD.			
Mailing Address	Principal Office Address	Principal Office Address		5a. Capital Contributions as Shown on record.
% THE DEVELOPMENT GROUP, INC. 1301 RIVERPLACE BLVD. STE. 1830 JACKSONVILLE FL 32207-9047	% THE DEVELOPMENT GROUP. INC. 1301 RIVERPLACE BLVD. STE. 1830 JACKSONVILLE FL 32207-9047		02/19/1991 38. Date of Lest Report 12/09/1997 4. State or Country of Formation	\$4,000,200.00 5b. Amount of Capital Contributions in FLORIDA to date:
2. Malling Address	2a. Principal Office Address	2a. Principal Office Address		
Suite, Apt. #, etc.	Suite, Apt. #, etc.			Applied For Not Applicable
City & State	City & State		59-3057086 7. Certificate of Status Desired	\$8.75 Additional
Zip Country	Zip	Country		Fee Required State (See reverse side for fee Information)
9. Name and Address of Current Registered Agent			10. if changed, new Registered Agent/Office	
JACQUOT, J.W. 1301 RIVERPLACE BLVD. SUITE 1830 JACKSONVILLE FL 32207-9047		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 at for the purpose of changing its registered office or agent. I am familiar with, and accept the obligation SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT	registered egent, or both, in the State of Flor is of section 620.192, Floride Statutes.	ide. Such chenge was	authorized by its general partner(s). I hereby	State of Florida , submits this statement y accept the appointment of registered
MUS 11. Name(s) of General Partner(s)	T BE REGISTERED AN Address of Each General	-10		11c. Registration/
THE DEVELOPMENT GROUP INC.	11a. (Do NOT Use Post Office B		JACKSONVILLE FL 32207 300026 -09/18/	H08353
Note: General partners MAY NO				all

12. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of

empowered to execute this report as required by chapter 629. Floride Statutes.

SIGNATURE

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 alignature 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