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

SIGNATURE

Typed or Printed Name of General Partner Signing Form

DOCUMENT# A31403

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 DEC 14 AM 9: 27

FEDERAL RESOURCE INCOME PROGRAM, LTD.					
Mailing Address C/O GUY S. DELLA PENNA 1800 SECOND STREET. SUITE 780	Principal Office Address C/O GUY S. DELLA PENNA 1900 SECOND STREET. SUITE 780		3. Date Formed or Registered 04/03/1991 3a. Date of Last Report	5a. Capital Contributions as Shown on record.	
SARASOTA FL 34236 Ž. Mailing Address	SARASOTA FL 34236 2a. Principal Office Address		12/22/1997 4. State or Country of Formation FL	5b. Amount of Capital Contributions in FLORIDA to date:	
Suite, Apt. #, etc. City & State	Suite, Apt. #, etc. City & State		6. FEI Number 62-0260154 7. Certificate of Status Desired	Applied For Not Applicable	
Zip Country	Zip Country			\$8.75 Additional Fee Required State (See reverse side for fee information)	
9. Name and Address of Current Registered Agent		Name	10. If changed, new Registered Agent/Office		
DELLA PENNA, GUY S. 1800 SECOND STREET, SUITE 780 SARASOTA FL 34236		Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, stc.			
		City FL Zip Code			
10a. Pursuant to the provisions of sections 620.1051 and 62 for the purpose of changing its registered office or regis agent. I am familiar with, and accept the obligations of SIGNATURE (Registered Agent Accepting Appointment)	stered agent, or both, in the State of Floric	d limited partnershi da. Such change w	ip organized or registered under the laws of the law as authorized by its general partner(s). I hereby DATE	State of Florida, submits this statement accept the appointment of registered	
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)	Address of Each General 11a. (Do NOT Use Post Office Bo		1b. City, State & Zip Code	11c. Registration/ Document Number	
PENNA, GUY S. DELLA	1800 SECOND ST., #780		SARASOTA FL		
MIDWEST ENERGY CORP.	1800 SECOND ST., #780		SARASOTA FL	L77240	
, ,			9000027 12/21/3 ****53	168997 36-01002-012 5.00 ****535.00	
Note: General partners MAY NOT b	e changed on this form	ı; an amen	dment must be filed to cha	inge a general partner.	

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

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Corporations from any flability 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 signetfy 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 adjusted by charges 100. Florida Statutes.

Daytime Telephone Number