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

1a. DOCUMENT # **A31441**

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 DEC 29 AM 10: 08

TME PARTNERS III, LTD.				₩ 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Mailing Address	Principal Office Address			3. Date Formed or Registered	5a. Capital Contributions as Shown on record.		
933-NORTH SAM-HOUSTON PKWY: E.:-SUITE-500			04/17/1991				
HOUSTON-TX-77000				3a. Date of Last Report	\$1,591,250.00		
				11/04/1997	5b. Amount of Capital Contributions in FLORIDA to date:		
2. Mailing Address	2a. Principal Office Address			4. State or Country of Formation	to cate.		
3396 Willow Lane	3396 Willow Lane			TX	•		
Suite, Apt. #, etc. # 20 1	Suite, Apt. #, etc. # 2.0 1	Suite, Apt. #, etc. # 20 L		6. FEI Number	6-0300548 Applied For Not Applicable		
City & State	City & State			76-0300548			
Westlake Village, CA	Westlake Village, CA		CA	7. Certificate of Status Desired	\$8.75 Additional Fee Required		
Zip Country	Zip Country			8. Make check payable to: Dept. of State (See reverse side for fee information)			
91361 USA	91361	USA		0.			
9 Name and Address of Current Registered Agent			10, if changed, new Registered Agent/Office				
		Name					
THE PRENTICE HALL CORPORATION SYSTEM, INC. 1201 HAYS ST		Street Address (P.O. Box Number Is Not Acceptable)					
SUITE 105	Suite, Apt.		ıtc.	والله المنظم			
TALLAHASSEE FL 32301				5080027448658: 			
LUTEU IVOOFF I F 0500 I			*****526.251 *****526.251				
10a. Pursuant to the provisions of sections 620.1051 and 6 for the purpose of changing its registered office or reg agent. I am familiar with, and accept the obligations of	istered agent, or both, in the State of Florid	l limited partnersh la. Such change v	nip organ was auth	orized by its general partner(s). I hereby	State of Florida, accept the app	submits this statement cintment of registered	
SIGNATURE (Registered Agent Accepting Appointment)DATE						ECC ENTITY	
A GENERAL PARTNER THAT I	BE REGISTERED ANI	D ACTIVE	WIT	TH THIS OFFICE.			
11. Name(s) of General Partner(s)	11a. Address of Each General	Numbers)	11b.	City, State & Zip Code	11c.	Registration/ Document Number	
FIRST THE PARTNERS, INC.	-333 N. SAM HOUSTON PKHG		HO	LSTON-TX-	P33532		
			ves t	lake Village, (9136)			
Note: General partners MAY NOT	he changed on this form	r an amen	ndme	nt must be filed to cha	nge a ge	neral partner	
 I do hereby certify that the information supplied with this Corporations from any liability of non-compliance with Se 	ning is voluntarily rumished and does not dection 119.07(3)(k) in the event that the info	quainy for the exe ormation supplied	is deem	ed exempt from public access. I further	certify that the in	formation 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 charger 620, Florida Statutes.

Secretary

Wayne K. Baldwin,