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# A32403

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 DEC 31 PM 2: 24

GOLDEN OAKS OF FLORIDA LIMITED PARTNERSHIP

GOLDEN OAKS OF FLORIDA LIN	MITED PARTNERSHI	P			
Mailing Address 390 N. ORANGE AVE. SUITE 1100	Principal Office Address 950 N. ORLANDO STE. 320 WINTER PARK FL 32789 2a. Principal Office Address Suite, Apt. #, etc. City & State		3. Date Formed or Registered 5a. Capital Contributions as Shown on record. \$2,225,000.00	Snown on record.	
ORLANDO FL 32801 2. Mailing Address			10/03/1997 4. State or Country of Formation FL	5b. Amount of Capital Contributions in FLORIDA to date:	
Suite, Apt. #, etc. City & State			6. FEI Number 59-3119710	Applied For Not Applicable	
Zip Country	Zip C	Country	7. Certificate of Status Desired 8. Make check payable to: Dept. of S	\$8.75 Additional Fee Required State (See reverse side for fee information)	
9. Name and Address of Current Reg	istered Agent	`	10. If changed, new Registered	Agent/Office	
- 		Name			
B&C CORPORATE SERVICES OF CENTRAL FI 390 N. ORANGE AVENUE	LORIDA	Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc.			
SUITE 1100					
ORLANDO FL 32801	Ę	City		FL Zip Code	
10a. Pursuant to the provisions of sections 620.1051 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 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, I am familiar with, and accept the obligations of section 620.192, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment)					
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 (Do NOT Use Post Office Box	Partner Numbers) 116	City, State & Zip Code	11c. Registration/ Document Number	
GOLDEN OAKS, INC.	950 N. ORLANDO AVE., S	<i>y</i> .	VINTER PARK FL 32789	P94000005268	
MBE CONSTRUCTION & MARINE IN	4 PALM DRIVE	(DRMOND BEACH FL 32176	N37855	
			8000027 01/05/5 *****53	311788 3-01092-023 5.00 ****535.00	

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12.	I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of
	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 truster
	empowered; to execute this sepon as required by cylapter 620, Florida-Statutes.