


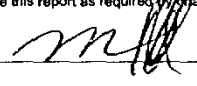


FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED 99 FEB 16 PM 2:40 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
1. Name of Limited Partnership CPS PROPERTIES, LTD.		1a. DOCUMENT # A32813			
Mailing Address 735 COLORADO AVENUE, SUITE 6 STUART FL 34994		Principal Office Address 324 ROYAL PALM WAY, SUITE 230 PALM BEACH FL 33480		3. Date Formed or Registered 04/08/1992	
2. Mailing Address P.O. Box 2771		2a. Principal Office Address P.O. Box 2771		3a. Date of Last Report 12/01/1997	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. State or Country of Formation FL	
City & State Palm Beach, FL		City & State Palm Beach, FL		5a. Capital Contributions as Shown on record \$0.00	
Zip 33480		Zip 33480		5b. Amount of Capital Contributions in FLORIDA to date	
				6. FEI Number 65-0386215 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
				7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				8. Make check payable to: Dept. of State (See reverse side for fee information)	
9. Name and Address of Current Registered Agent Haisfield, Audrey L 735 COLORADO AVENUE, SUITE 6 STUART FL 34994				10. If changed, new Registered Agent/Office Name Marc Haisfield Street Address (P.O. Box Number is Not Acceptable) P.O. 218 Royal Palm Way Suite, Apt. #, etc. 200 City RB. P.B. State FL Zip Code 33480	
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 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. I am familiar with, and accept the obligations of section 620.192, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment)  DATE 2/9/99					
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) BLUE CHIP REALTY, INC.		11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 735 COLORADO AVE., SU		11b. City, State & Zip Code STUART FL 34994	
				11c. Registration/Document Number P92000008122 4000002791334--8 -03/01/99--01153--015 ****141.25 ****141.25 dec.	
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 trustee empowered to execute this report as required by Chapter 620, Florida Statutes. SIGNATURE  DATE 2/9/99 Typed or Printed Name of General Partner Signing Form Marc Haisfield Daytime Telephone Number 561 655-2829					

CR2E003 (8/98)