

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

98 DEC 24 PM 3:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name of Limited Partnership

1a. DOCUMENT #
A33084

S. SUMMERLIN LIMITED PARTNERSHIP



Mailing Address 600 FIFTH AVENUE SOUTH, SUITE 210 NAPLES FL 34102		Principal Office Address 600 FIFTH AVENUE SOUTH, SUITE 210 NAPLES FL 34102		3. Date Formed or Registered 06/19/1992	5a. Capital Contributions as Shown on record. \$1,200,000.00
2. Mailing Address		2a. Principal Office Address		3a. Date of Last Report 12/22/1997	5b. Amount of Capital Contributions in FLORIDA to date.
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. State or Country of Formation FL	
City & State		City & State		6. FEI Number 65-0354532	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip		Country		7. Certificate of Status Desired	<input checked="" 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 WASMER, MARTIN M C/O WSR REALTY GROUP, INC. 600 FIFTH AVENUE SOUTH, SUITE 210 NAPLES FL 34102	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) 600002739406--7 Suite, Apt. #, etc. -01/13/99--01035--022 City ****535.00 ****535.00 FL Zip Code
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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

**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) MANNING PROPERTY CORPORATION N/K/A WSR REALTY GROUP, INC.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 600 FIFTH AVENUE SOUT	11b. City, State & Zip Code NAPLES FL 34102	11c. Registration/Document Number G79320
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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

Donna M. Sisia

DATE

11/18/98

Typed or Printed Name of General Partner Signing Form

Donna M. Sisia

Daytime Telephone Number

941-263-6877

CR2E003 (8/98)