WILL BE SUBJECT TO REVOCA				_	
LIMITED PARTNERSHIP ANNUAL REPORT 1999	FLORIDA DEPARTMENT OF STATE  Sandra B. Mortham  Secretary of State  DIVISION OF CORPORATIONS		FJ	FILED 98 DEC 29 PM 12: 53	
1. Name of Limited Partnership	1a. DOCUMENT # A33312		<b>§</b>	SECRETARY OF STATE TALLAHASSEE. FLORIDA	
TPG SANIBEL REALTY, LTD.					
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.	
1690 PERIWINKLE WAY	1630 PERIWINKLE WAY		08/07/1992		
SANIBEL ISLAND FL 33957	SANIBEL ISLAND FL 33957		3a. Date of Last Report	\$25,252.50	
			12/16/1997	5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	to date:	
	Cuito Ant # of-		FL		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6, FEI Number	Applied For Not Applicable	
City & State	City & State		43-1440536 7. Certificate of Status Desired		
Zip Country	Zlp Country			\$8.75 Additional Fee Required	
	<del></del>		O. Wake check payable to: Dept. or S	tate (See reverse side for fee information)	
9. Name and Address of Current Registered Agent			10. If changed, new Registered Agent/Office		
PETERSS, FRANCES M		Name Bruce A Provo			
1630 PERIWINKLE WAY		Street Address (P.O. Box Number is Not Acceptable)  1630 Plack in Kla Way			
SANIBEL ISLAND FL 33957		Suite, Apt. #, etc	c.	7	
City SAI		City SAN. b	andel I stand FL 33957		
10a. Pursuant to the provisions of sections 620.1051 and 620.195, Florida Statyles, 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 byta, 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)	5 huy		DATE	421/98.	
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) 1	1b. City, State & Zip Code	11c. Registration/ Document Number	
TPG FINANCIAL, INC.	101 W. 11TH ST., #120		KANSAS CITY MO	P33404	
			-01/15/	7450883: /99-01126-016 /5.52 ****265.52:	

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 any final 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. Fibrida Statutes.

Daytime Tolephone Number

**SIGNATURE** 

Typed or Printed Name of General Partner Signing Form