## 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

1a. DOCUMENT # A33468

CNL INCOME FUND XIII, LTD.

empowered to execute this report as required by chapter 620 Florida Statutes.

SIGNATURE.

Typed or Printed Name of General Partner Signing Form

FILED 98 0CT 27 PM 1: 43

SECREIAH OF STATE TALLAHASSEE, FLORIDA



10/7/98

Daytime Telephone Number

(407) 650-1000

Mailing Address	Principal Office Address		3. Date Formed or Registered		<b>5a.</b> Capital Contributions as Shown on record.		
400 EAST SOUTH STREET, SUITE 500	400 EAST SOUTH STREET. SUITE 500 ORLANDO FL 32801		09/25/1992 3a. Date of Last Report		\$40,000,000.00		
ORLANDO FL 32801							
			11/03/19	97	5b. Amou	int of Capital ibutions in FLORIDA	
			4. State or Country of Formation		to cate.		
2. Mailing Address	2a. Principal Office Address	2a. Principal Office Address			\$40,000,000.00		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	6, FEI Number Applied For			
City & State	City & State	City & State		─ 59-3143094 ☐ Not Applicable			
	Only & Out to			Status Desired		\$8.75 Additional	
Zip Country	Zip	Zip Country		Fee Required  8. Make check payable to: Dept. of State (See reverse side for fee information)			
9. Name and Address of Current	10. If changed, new Registered Agent/Office						
DOUBLE DODEDT A	Name  Street Address (P.O. Box Number Is Not Acceptable)  Suite, Apt. #, etc.						
BOURNE, ROBERT A 400 EAST SOUTH STREET, SUITE 500							
ORLANDO FL 32801							
	City Zip Code						
					FL_		
10a. Pursuant to the provisions of sections 620.1051 and for the purpose of changing its registered office or re agent. 1 am familiar with, and accept the obligations	egistered agent, or both, in the State of Florid						
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)	11a. Address of Each General (Do NOT Use Post Office Bo		City, State &	Zip Code	11c.	Registration/ Document Number	
CHI PELLEY COPPORTION	100 5107 001571 07 #		1 1 1 1 1 0 0 Pl		1107004		
CNL REALTY CORPORATION	400 EAST SOUTH ST., #	'	ORLANDO FL		H87301 E 784412		
SENEFF, JAMES M	400 EAST SOUTH ST., #		ORLANDO FIL DIDDIDES		78	4412	
BOURNE, ROBERT A	400 EAST SOUTH ST., #	0	RLANDO FL	-11/U3/ ****52!	88U. 8 25	1008009 ****526.25	
*				dealer) as Cilmi	W* 62-63	444444000000000000000000000000000000000	
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			AL OCT 2 7 1998				
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							

Robert A. Bourne