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

99 JAN 22 AM 8:55

1. Name of Limited Partnership

1a. DOCUMENT # A33521

HEATHERWOOD KISSIMMEE, LTD.

Mailing Address
~~PO BOX 369~~
~~BONITA SPRINGS FL 34133-0369~~

Principal Office Address
7826 COOPER RD
CINCINNATI OH 45242

2. Mailing Address
7826 Cooper Rd
Suite, Apt #, etc
City & State
Cincinnati OH
Zip 45242 Country

2a. Principal Office Address
Suite, Apt #, etc
City & State
Zip Country

3. Date Formed or Registered
10/02/1992

3a. Date of Last Report
02/13/1998

4. State or Country of Formation
FL

5a. Capital Contributions as Shown on record
$350,000.00

5b. Amount of Capital Contributions in FLORIDA to date

6. FEI Number
59-3124614
☐ Applied For
☐ Not Applicable

7. Certificate of Status Desired ☐ $8.75 Additional Fee Required

8. Make check payable to Dept. of State (See reverse side for fee information)
$526.25

9. Name and Address of Current Registered Agent
~~GK-RA CORP.~~
~~1428 BRICKELL AVE., 6TH FL.~~
~~MIAMI FL 33131~~

10. If changed, new Registered Agent/Office
Name
Street Gregory K. McGrath
4561 Gulf of Mexico Drive #101
Suite Longboat Key, FL 34228
City
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 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) Gregory K McGrath DATE 1/11/99

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)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/Document Number
BARON CAPITAL XLV, INC.	7826 COOPER ROAD	CINCINNATI OH 45242	P97000028614

01/22/99 01003 003
****526.25 ****526.25

***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 Gregory K McGrath DATE 1/11/99

Typed or Printed Name of General Partner Signing Form Gregory K McGrath Daytime Telephone Number 813 984 5001

CR2E002 (8/98)