FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP

WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE FLORIDA DEPARTMENT OF STATE LIMITED PARTNERSHIP DIVISION OF CORPORATIONS Sandra B. Mortham ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 98 DEC 22 AM 8: 51 **DOCUMENT #** 1. Name of Limited Partnership A93000000368 W.E. FOX MORTGAGE COMPANY LTD. 3. Date/Formed or Registered Mailing Address Principal Office Address Capital Contributions as Shown on record. 04/13/1993 P.O. BOX 1646 271 AQUA COURT \$120,000.00 NAPLES FL 34106-1646 NAPLES FL 34102 3a. Date of Last Report 12/31/1997 5b. Amount of Capital Contributions in FLORIDA to date: 4. State or Country of Formation 2a. Principal Office Address 2. Mailing Address FL Suite, Apt. #, etc. Suite, Apt. #, etc. 6. FEI Number Applied For Not Applicable 65-0501867 City & State City & State 7. Certificate of Status Desired \$8.75 Additional Fee Required Zip Country Zip Country 8. Make check payable to: Dept. of State (See reverse side for fee information) 9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number Is Not Acceptable) 1201 HAYS STREET Suite, Apt. #, etc. SUITE 105 TALLAHASSEE FL 32301 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 state 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. Address of Each General Partner (Do NOT Use Post Office Box Numbers) Registration/ 11. Name(s) of General Partner(s) 11b. City, State & Zip Code 11c. Document Number CR2E003 (8/98 NAPLES FL 33940 34102 271 AQUA COURT FOX, WILLIAM E W.E. FOX MORTGAGE GP CORP. 271 AQUA COURT NAPLES FL 34102 P97000057265 30000273:5773--01/08/39--01125-010 ****526.25 ****526.25

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner. I do hereby certify that the information supplied with this filling 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 Sta

SIGNATURE

Typed or Printed Name of General Partner Signing Form

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