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

DOCUMENT# A93000000482

FILED

98 SEP 21 PM 1: 20

SECKETZAY OF STATE TALLAHASSEE, FLORIDA

GARDEN WALK ASSOCIATES, LTD.				
Mailing Address 645 N.W. 62ND STREET. SUITE 300 MIAMI FL 33131 2. Mailing Address Suite, Apt. #, etc. City & State	2a. Principal Office Address Suite, Apt. #, etc.	645 N.W. 62ND STREET. SUITE 300 MIAMI FL 33131 28. Principal Office Address		5a. Capital Contributions as Shown on record. \$1,000.00 5b. Amount of Capital Contributions in FLORIDA to dete: Applied For Not Applicable
Zip Country	Zip			\$8.75 Additional Fee Required
		Street Address (P.O. Box Number is Not Acceptable) Sulte, Apt. #, etc. City Lip Code Tamed limited partnership organized or registered under the laws of the State of Floride, submits this statement Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered DATE		
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.				
11. Name(s) of General Partner(s)	11a. (Do NOT Use Post Office E	30x Numbers) 1	1b. City, State & Zlp Code	11c. Registration/ Document Number
CRONACHER GARDEN WALK, INC. TACOLCY GARDEN WALK, INC.	800 LAUREL OAK DRIVE 645 N.W. 62ND STREET		NAPLES FL 33963 MIAMI FL 33131	P93000033288 P93000032953
				5 476 391

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12, I do hereby cartify 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 cath. I further certify that I am a General Pertner of the limited partnership, receiver or trustee

SIGNATURE

****1501.00 ****150.00