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# A93000000505

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 NOV 30 AMIO: 11

JANET M. TEW FAMILY LIMITED PARTNERSHIP				D12/3			
Mailing Address	Principal Office Address			3. Date Formed or Registered	5a. Capital Contributions as Shown on record.		
P.O. BOX 390 MELROSE FL 32666	P.O. BOX 390 MELROSE FL 32666		_	05/06/1993 3a. Date of Last Report 01/16/1998	\$1,000,000.00 5b. Amount of Capital Contributions in FLORIDA		-
2. Mailing Address	2a. Principal Office Address			4. State or Country of Formation	to date:		
Suite, Apt. #, etc.	Sulte, Apt. #, etc.			6. FEI Number 59-3194077	Applied For Not Applicable		1
	City & State			7. Certificate of Status Desired		\$8.75 Additional Fee Required	1
Zip Country	Zip Country			8. Make check payable to: Dept. of State (See reverse side for fee information			1
9. Name and Address of Current Registered Agent Name			10. If changed, new Registered Agent/Office				
TEW, ERNEST 106 LAKEVIEW TERRACE MELROSE FL 32666		Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc.					
	City			FL Zip Code			
10a. Pursuant to the provisions of sections 620,1051 and 620 for the purpose of changing its registered office or regist agent. I am familiar with, and accept the obligations of sections.	ered agent, or both, in the State of Florida	limited partners a. Such change	hip organize was authori	ed or registered under the laws of the ized by its general partner(s). I hereby	State of Florid accept the ap	a, submits this statement pointment of registered	
SIGNATURE (Registered Agent Accepting Appointment)				DATE			
A GENERAL PARTNER THAT IS MUST E	A CORPORATION, L SE REGISTERED AND	IMITED F	PARTI E WITI	NERSHIP OR OTHE H THIS OFFICE.	R BUSII	NESS ENTITY	
11. Name(s) of General Partner(s)	11a. Address of Each General (Do NOT Use Post Office Box	Partner (Numbers)	11b.	City, State & Zip Code	11c.	Registration/ Document Number	╛.
TEW, JANET M	106 LAKEVIEW TERRACE		MELROSE FL 32666				(80/8)
TEW, ERNEST	106 LAKEVIEW TERRACE		MELROSE FL 32666)OEO
DOOLEY, SANDRA	56 SE 35TH ST.		KEYSTONE HEIGHTS FL 3				5
				8000027 -12/04/9 ****52	040 8011 6.25	486 15011 ****\$26.25	

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 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 Statutes.

OIGNAIURE	

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

352) 475.1800