FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT **TO REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP **ANNUAL REPORT** 1998

FAIRWAY VIEW APARTMENTS, LTD.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # A93000000511

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

97 DEC 31 AM 9: 27



Malling Address	Principal Office Address		3. Date Formed or Registered	58. Capital Contributions as Shown on record			
1500 N.W. 49TH ST., 5TH FLOOR	1500 N.W. 49TH ST., 5TH FLOOR		05/13/1993	\$250,000,00			
FT LAUDERDALE FL 33309	FT LAUDERDALE FL 33309		3a. Date of Last Report	\$250,000.00			
			02/12/1997	5b. Amount of Capital Contributions in FLORIDA			
0	130		4. State or Country of Formation	to date			
2. Mailing Address	28. Principal Office Address		FL				
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	I			
City & State	City & State		65-0485992	Applied For Not Applicable			
Only & State	City & State		7. Certificate of Status Desired	\$8.75 Additional			
Zip Country	Zip	untry		Fee Required			
			D, 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				
BOYLE, CONRAD J ESQ SUITE 1950, 500 E. BROWARD BLVD. FT LAUDERDALE FL 33394		Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc.					
							City
		10a. Pursuant to the provisions of sections 620 1051 a for the purpose of changing its registered office agent. I am familiar with, and accept the obligation	or registered agent, or both, in the State of Florida	nited partnership o Such change was	rganized or registered under the laws of the authorized by its general partner(s). There	ie State of Florida, submits this statement Juby accept the appointment of registered	
SIGNATURE (Registered Agent Accepting Appointment)			DA1E _				
A GENERAL PARTNER THA	T IS A CORPORATION, LIN ST BE REGISTERED AND	NITED PAR ACTIVE W	RTNERSHIP OR OTHE /ITH THIS OFFICE.	R BUSINESS ENTITY			
11. Name(s) of General Partner(s)	Address of Each General Pa (Do NOT Use Post Office Box No	rtner unibers) 11b	, City, State & Zip Code	11c. Registration/ Decument Number			
KEENAN FAIRWAY GROUP, INC. 1500 NW 49TH STREET,		F	T LAUDERDALE FL 3330	P94000024605			
			30002 -01/19 ****)	4019538 /88-01996-003 08,75]/****103,75			
			300002 -01/19 ****4	401953-+8 /8801990010 37.50 ****437.50			
2							
Notes Concret northere MAY NO	T he changed on this form:	n omonda	ant must be filed to she	ngo a gonorol partner			

Typed or Printed Name of General Partner Signing Fo

AR SEC TREAS

12. I do hereby certify that the information supplied with this himg is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes T 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 logal effects as if made under earth. 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 6/0. Florida Statutes

Daytime Telephone Number .

DATE, CECHIPT