

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

FILED

98 APR -3 AM 11:01

SECRETARY OF STATE
1711 ATLANTIC AVENUE
ATLANTA, GEORGIA

LIMITED PARTNERSHIP ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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1. Name of Limited Partnership	1a. DOCUMENT # A93000000899
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TUCKER FUND, L.P. LIMITED PARTNERSHIP



Mailing Address 100 EXECUTIVE WAY, #212 PONTE VEDRA BEACH FL 32082	Principal Office Address 100 EXECUTIVE WAY, #212 PONTE VEDRA BEACH FL 32082
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3. Date Formed or Registered 09/02/1993	5a. Capital Contributions as Shown on record \$500,000.00
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3a. Date of Last Report 03/07/1997	5b. Amount of Capital Contributions in FLORIDA to date:
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2. Mailing Address 3216 Ponte Vedra Blvd Suite, Apt. #, etc.	2a. Principal Office Address 3216 Ponte Vedra Blvd Suite, Apt. #, etc.
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4. State or Country of Formation FL	6. FEI Number 59-3185284
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City & State Ponte Vedra Bch FL	City & State Ponte Vedra Bch FL
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7. Certificate of Status Desired <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	8. Make check payable to: Dept. of State (See reverse side for fee information)
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Zip 32082	Country St Johns	Zip 32082	Country St Johns
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9. Name and Address of Current Registered Agent BLACKSTOCK, HENRY T 100 EXECUTIVE WAY, #212 PONTE VEDRA BEACH FL 32082	10. If changed, new Registered Agent/Office Name: Henry T Blackstock Street Address (P.O. Box Number is Not Acceptable) 3216 Ponte Vedra Blvd Suite, Apt. #, etc. City: Ponte Vedra Bch FL Zip Code: 32082
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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) _____ DATE _____

**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) BLACKSTOCK, HENRY T	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 100 EXECUTIVE WAY, #2	11b. City, State & Zip Code PONTE VEDRA BEACH FL 300002482783- - 1 -04/08/98 --01077 --003 ****526.25 ****526.25	11c. Registration/ Document Number
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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 _____ DATE 12/29/97

Typed or Printed Name of General Partner Signing Form _____ Daytime Telephone Number _____

CP2E003 (5/97)