


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 PROVIDENCE LAKES, LTD.		1a. DOCUMENT # A93000000977	

FILED
98 DEC 18 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Mailing Address C/O BAY HILL HOMES, INC. 1502 WEST FLETCHER AVE., SUITE 113 TAMPA FL 33612		Principal Office Address C/O BAY HILL HOMES, INC. 1502 WEST FLETCHER AVE., SUITE 113 TAMPA FL 33612		3. Date Formed or Registered 09/27/1993	5a. Capital Contributions as Shown on record. \$5,000.00
2. Mailing Address		2a. Principal Office Address		3a. Date of Last Report 12/29/1997	5b. Amount of Capital Contributions in FLORIDA to date: <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/> \$8.75 Additional Fee Required
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. State or Country of Formation FL	
City & State		City & State		6. FEI Number 59-3204862	
Zip Country		Zip Country		7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
8. Make check payable to: Dept. of State (See reverse side for fee information)					

9. Name and Address of Current Registered Agent GREER, JOHN C/O BAY HILL HOMES, INC. 1502 WEST FLETCHER AVE., SUITE 113 TAMPA FL 33612	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code
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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) BAY HILL HOMES, INC.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 1502 WEST FLETCHER AV	11b. City, State & Zip Code TAMPA FL 33612	11c. Registration/Document Number S39575
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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

Provided and signed by Bay Hill Homes General Partner

DATE

11-25-98

Typed or Printed Name of General Partner Signing Form

JOHN GREER

Daytime Telephone Number

813-962-8173

CR2E003 (8/98)