## 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

SIGNATURE.

1a. DOCUMENT # A9300001318

SECRETARY OF STATE DIVISION OF CORPORATION

98 DEC -7 AM 11: 32

10-22-98

LAKE HELEN COURT RRH, LTD.							
Mailing Address	Principal Office Address		3. Date Formed	3. Date Formed or Registered		<b>5a.</b> Capital Contributions as Shown on record.	
P.O. DRAWER 2610 GAINESVILLE FL 32602-2610	205 N.W. 22ND STREET GAINESVILLE FL 32603-1414		3a. Date of Last	12/10/1993 3a. Date of Last Report 09/23/1997		\$797,804.00  5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address	2a. Principal Office Address		4. State or Count	ry of Formation	to date:		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		FL 6. FEI Number 59-32708	72	Applied For Not Applicable		
City & State	City & State		7. Certificate of S		\$8.75 Additional Fee Required		
Zip Country	Zip Country		8. Make check pa	Fee Required  8. 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 Name					
SANCHEZ, J. ROLANDO 205 N.W. 22ND STREET		Street Address (P.O. Box Number Is Not Acceptable)					
GAINESVILLE FL 32603-1414			t. #, etc.				
	City			FL Zip Code			
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)	11a. Address of Each General I	Partner Numbers) 1	1b. City, State & Z	ip Code	11c.	Registration/ Document Number	
CHAPMAN, WAYNE A	4935 N. SURFCREST DRI		OAK HARBOR WA 98277				
SAŅCHEZ, J. ROLANDO	205 N.W. 22ND STREET		GAINESVILLE FL 32603				
**			100	10027) -12/09/9 ****535	075 8010 8-010	3.1 —— 3 80024 ****\$535.00	

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 game 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 Statistics.