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

LIMITED PARTNERSHIP ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandrů B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

a. DOCUMENT # **A93000001367**

SECRETARY OF STATE DIVISION OF CORPORATIONS

98 JAN 20 PM 3: 35



450 CHALLENGER RD. CAPE CANAVERAL FL 32820 450 CHALLENGER RD. CAPE CANAVERAL FL 32820 2 A. Principal Office Address 2 B. Principal Office Address 2 B. Principal Office Address 5 D. Amount of Capital Contributions in FLC Contributions i					
Mailing Address Principal Office Address 430 CHALLENGER RD. CAPE CANAVERAL FL 32820 COUNTRY OF Formation FL Contributions in FL Country Of Formation FL Contributions in FL Country Cape Canaverage Cape Canaverage Cape Cape Cape Cape Cape Cape Cape Cap	DISTO GROUP, LTD.		I DOBION DEPENDING BOND BOND	#8#IF 48#IF 40#IF 8### 110#6	
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CAPE CANAVERAL FL 32920 Cape Canaveral Fl 329	ailing Address	Principal Office Address	3. Date Formed or Registered	58. Capital Contributions as Shown on record.	
Suite, Apt. #, etc. 2. Mailing Address 3. State or Country of Formation FL. 5. Suite, Apt. #, etc. 5. Suite, Apt. #, etc. 6. FEI Number 59-32 13396 Applied Not Applied 7. Cornificate of Status Desired 7. Cornificate of Status Desired 8. Make check payable to: Dept. of State (See reverse side for fermation) 9. Name and Address of Current Registered Agent 10. If changed, now Registered Agent/Clifice POPP, GREGORY A 450 CHALLENGER RD. CAPE CANVERAL FL 32920 Suite, Apt. #, etc. City A State #, etc. City A State #, etc. City A State #, etc. Suite, Apt. #, etc. City A State #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City FL Sip Code FL Sip Code FL Signatures the the provisions of sections 620 1051 and 620 192, Florida Statutes, the above-named limited partnership organized or registered under the taws of the State of Florida, submits the 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 hordely accept the appointment agent. Len femiliar with, and accept the Obligations of section 620 192, Florida Statutes. The State of State Agent Accepting Appointment State of State Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS E MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.	50 CHALLENGER RD.	450 CHALLENGER RD.	12/15/1993	\$10,000,100,00	
2. Mailing Address 28. Principal Office Address FL Suite, Apt. #, etc. City & State To Country Tip Tip Country Tip Tip Country Tip Tip Tip Tip Tip Tip Tip Ti	APE CANAVERAL FL 32920	CAPE CANAVERAL FL 32920	1	\$ 10,023,100,00	
2. Mailing Address 3. Suite, Apt. #, etc. 3. Suite, Apt. #, etc. 4. State 5. FEI Number 5. Suite, Apt. #, etc. 7. Certificate of Status Desired 7. Certificate of Status Desired 7. Certificate of Status Desired 8. Make check payable to: Dept. of Statis (See reverse side for ference) 9. Name and Address of Current Registered Agent 10. If changed, now Registered Agent/Office POPP, GREGORY A 450 CHALLENGER RD. CAPE CANVERAL FL 32920 Suite, Apt. #, etc. City FL Zip Code 10. Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code 10. 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 in 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 agent. I em femiliar with, and accept the obligations of section 620. 192, Florida Statutes. A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS E MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.			01/30/1997	5b. Amount of Capital Contributions in FLORIDA	
Suite, Apt. #, etc. Suite, Ap	2. Mailino Address	28. Principal Office Address	4. State or Country of Formation	to date:	
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Fee Rec. 9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office POPP, GREGORY A 450 CHALLENGER RD. CAPE CANVERAL FL 32820 Suite, Apt. #, 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 taws of the State of Florida, submits the 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 the median with, and accept the obligations of section 620 192, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment) OATE A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS E MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.	City & State	City & State		Not Applicable	
9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office POPP, GREGORY A 450 CHALLENGER RD. CAPE CANVERAL FL 32920 Suite, Apt. #, etc. City Light registered under the laws of the State of Florida, submits the for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of agent. I em femiliar with, and accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS E MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.	io Country	Zip Country	7. Certificate of Status Desired	\$8.75 Additional Fee Required	
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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 the 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 agent. I em femiliar 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 E MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.	Ora E Grant Field I E GEOEG			l Zin Code	
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A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS E MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.	for the purpose of changing its registered offi	ce or registered agent, or both, in the State of Florida. Such ch	inership organized or registered under the laws of t ange was authorized by its general partner(s). I he	he State of Fiorida, submits this statement reby accept the appointment of registered	
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.	IGNATURE (Registered Agent Accepting Appointment	1)			
11. Name(s) of General Partner(s) 11a. Address of Each General Partner 11b. City. State & Zip Code 11c. Registra Document N	A GENERAL PARTNER TH	AT IS A CORPORATION, LIMITEI UST BE REGISTERED AND ACT!	D PARTNERSHIP OR OTHE VE WITH THIS OFFICE.	R BUSINESS ENTITY	
	1. Name(s) of General Partner(s)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number	
GROUP EDISTO, INC. 450 CHALLENGER RD. CAPE CANAVERAL FL 329 P93000085632	GROUP EDISTO, INC.		CAPE CANAVERAL FL 329	P93000085632	
HABITAT AMERICA, INC. 200 FRANKLIN RD., NE, ATLANTA GA 30342 F94000000510	HABITAT AMERICA, INC.	200 FRANKLIN RD., NE,	ATLANTA GA 30342	F9400000510	
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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. Ido 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 Trelease 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.

a. It , VI of GP DATE 10/30/97

Michael A. Hartman, V.P. of 6. P. Daytme Telephone Number 407-799-4090 ex.28\$