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

DOCUMENT #

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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	A9400000187				ζ	
VCP - ALDERMAN PARK PARTNERS, LTD.						
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.		
3030 HARTLEY ROAD. SUITE 100 JACKSONVILLE FL 32257	3030 HARTLEY ROAD. SUITE 100 JACKSONVILLE FL 32257		02/15/1994 3a. Date of Last Report 11/24/1997	\$599,558.00 5b. Amount of Capital Contributions in FLORIDA to date: \$599,558.00		
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation			
Suite, Apt. #, etc. City & State	Suite, Apt. #, etc. City & State		6. FEI Number 59-3228307	Applied For Not Applicable		
Zip Country	Zip Country		7. Certificate of Status Desired		\$8.75 Additional Fee Required	
25 Country	Zip Country		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			
FARRELL, MARK T 3030 HARTLEY ROAD, SUITE 100 JACKSONVILLE FL 32257		Name Street Address (P.O. Box Number is NI Address) -12/22/3801079002 Suite, Apt. #, etc. ****526.25 City Zip Code				
10a. Pursuant to the provisions of sections 620,1051 and 65 for the purpose of changing its registered office or registered. I am familiar with, and accept the obligations of SIGNATURE (Registered Agent Accepting Appointment)	stered agent, or both, in the State of Florida. Sur					
A GENERAL PARTNER THAT IS	A CORPORATION, LIMI	TED PART	NERSHIP OR OTHE	R BUSI	NESS ENTITY	
11. Name(s) of General Partner(s)	BE REGISTERED AND A Address of Each General Partn (Do NOT Use Post Office Box Num	er 445	City, State & Zip Code	11c.	Registration/ Document Number	
VCP - ALDERMAN PARK, INC.	3030 HARTLEY ROAD, SU		EKSONVILLE FL 32257 P94000012587		000012587	
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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 cartify 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.

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DATE December 11, 1998

Typed or Printed Name of General Partner Signing Form

Mark T. Farrel1

Daytime Telephone Number

(904)260-3030