## 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#** A9400000354

## SPINNAKER REACH APARTMENTS OF DUVAL, LTD.

FILED 98 DEC 29 PM 4: 30 SECRETARY OF STATE TALLAHASSEE, FLORIDA

			6   186   187   187   185   186   186   186   186   186   186   186   186   186   186   186   186   186   186			
Mailing Address  1002 WEST 23RD STREET. SUITE 400 PANAMA CITY FL 32405	Principal Office Address  1002 WEST 23RD STREET, SUITE 400 PANAMA CITY FL 32405		3. Date Formed or Registered 03/18/1994 3a. Date of Last Report	5a. Capital Contributions as Shown on record.		
2. Mailing Address	2a. Principal Office Address		12/29/1997 4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 59-3230285	Applied For Not Applicable		
City & State  Zip Country	Zip Country		7. Certificate of Status Desired  8. Make check payable to: Dept. of	State /See reve	\$8.75 Additional Fee Required	
		· <u></u> -	O. IMake check payable to, Dept. of	Sizie (See Feve	ise side for the unionitiation.	
9. Name and Address of Current Re	10. compress new properties	7. 5 1 1 5 5 6 1 6 1 7				
HENRY, ROBERT F III 1002 WEST 23RD STREET, SUITE 400		Name0171479901065005				
		Street Address (P.O. Box Number Is Not Acceptable) ** 44851-87 ** ** *535-00				
PANAMA CITY FL 32405	<u> </u>					
City		City	FL Zip Code			
agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.  SIGNATURE (Registered Agent Accepting Appointment)  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)	Address of Facts Communit Destroy		1b. City, State & Zip Code		Registration/ Document Number	
ROYAL AMERICAN DEVELOPMENT,	1002 WEST 23RD STREET		PANAMA CITY FL 32405		598978	
			T.J.C. JAN	T.J.C. JAN 1 5 1999 ( 5676 8		
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 harmonic stated under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this proof as equired by chapter 620, Florida Statutes.						
SIGNATURE DATE 12/27/98						
Typed or Printed Name of General Partner Signing Form Lawrette J. Villaget. Sec. Daytime Telephone Number 850 764 8181						