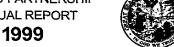
FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

SIGNATURE

1a. DOCUMENT # **A9400000407**

SECRETARY OF STATE DIVISION OF CORPORATIONS

98 DEC 21 PM 3: 44

	A9400000	A9400000407					
SPENCER FAMILY LIMITE	D PARTNERSHIP						
				M12/30			
Mailing Address	Principal Office Address	Principal Office Address		Date Formed or Registered	5a. Capital Contributions as Shown on record.		
1721 HERMIT SMITH ROAD	H HERMIT SMITH ROAD 1721 HERMIT SMITH ROAD		L	03/30/1994 3a. Date of Last Report \$1,350,000.00		250 000 00	
APOPKA FL 32712	APOPKA FL 32712	APOPKA FL 32712				300,000.00	
				02/09/1998	5b. Amor	int of Capital ibutions in FLORIDA e:	
2. Mailing Address	2a. Principal Office Address		4	State or Country of Formation	to da	e:	
Z. Maning Address	Za. Principal Office Address	Za. Principal Office Address		FL.			
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		FEI Number	Applied For Not Applicable		
City & State	City & State	City & State		59-3360411			
			7	7. Certificate of Status Desired		\$8.75 Additional	
Zip Country	Zip	Zip Country		Fee Required 8. Make check payable to: Dept. of State (See reverse side for fee information)			
				indication payable to book or		To the late of the	
9. Name and Address of Current Registered Agent				10. If changed, new Registered Agent/Office			
CODELAND DICHARD W	Name						
COPELAND, RICHARD W 631 PALM SPRINGS DR.		Street Address (P.O. Box Number Is Not Acceptable)					
SUITE 115		Suite, Apt. #, etc. 8000927283581 -12/31/9801071022					
ALTAMONTE SPRINGS FL 32701		-12/31/98 City ****5/8, 29			/98U.)c-)c -	1071022 1 2888 625-25 =	
		City		4-4-4-7-16	FL	- AND PORTICUE CO. M.	
for the purpose of changing its registered	1.1051 and 620.192, Florida Statutes, the above-name office or registered agent, or both, in the State of Flor billgations of section 620.192, Florida Statutes.						
SIGNATURE (Registered Agent Accepting Appointm				DATE			
	HAT IS A CORPORATION, I MUST BE REGISTERED AN	D ACTIV			R BUSI		
11. Name(s) of General Partner(s)	Address of Each General (Do NOT Use Post Office B	al Partner ox Numbers)	11b.	City, State & Zip Code	11c.	Registration/ Document Number	
SPENCER, DELBERT J		1721 HERMIT SMITH ROA		KA FL 32712			
SPENCER, SHIRLEY M	1721 HERMIT SMITH RO	A	APOPKA FL 32712				
pg '							
Note: General partners MAY	NOT be changed on this form	n; an ame	endment	must be filed to cha	inge a g	eneral partner.	

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 200, Florida Statutes.