FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP

Typed or Printed Name of General Partner Signing Form

WILL BE SUBJECT TO REVO	ATION AND \$500 PENALT	Y FEE			
LIMITED PARTNERSHIP ANNUAL REPORT - 1999	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		grine Gan	FILED 98 NOV -6 AM 10: 5 I	
1. Name of Limited Partnership	1a. DOCUMENT # A9400001235		SECRETARY OF STATE TALLAHASSEE, FLORIDA		
CLIFFWOOD HOLDINGS, LTD.					
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.	
5444 WESTHEIMER SUITE 1605 HOUSTON TX 77056	355 E. ALTAMONTE DR., SUITE 1010 ALTAMONTE SPRINGS FL 32701		09/12/1994 3a. Date of Last Report	\$999.00	
		11/20/1997 4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:		
2. Mailing Address	2a. Principal Office Address		FL	o date.	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For	
City & State	City & State		59-3268194	Not Applicable	
Zip Country	Zip Country		7. Certificate of Status Desired 8. Make check payable to: Dent of St	\$8.75 Additional Fee Required ate (See reverse side for fee information)	
9. Name and Address of Current Registered Agent 10. If changed.				Agent/Office	
DYMOND, WILLIAM T		Street Address (P.	O. Box Number Is Not Acceptable)		
215 N. EOLA DRIVE ORLANDO FL 32801	Suite, Apt. #,				
		City	· · · · · · · · · · · · · · · · · · ·	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.					
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	Partner (Numbers) 111	City, State & Zip Code	11c. Registration/ Document Number	
CLIFFWOOD PROPERTIES, INC.	5444 WESTHEIMER, SUIT		HOUSTON TX 77056	P94000066443 (96)(96)(96)(96)(96)(96)(96)(96)(96)(96)	
			0000026 -11/10/ ****14	′ 9 801084025	
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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 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 179.07(3)(k) in the event that the information pupplied 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 live the same legal effects as if made on the cath. 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.					