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

LIMITED PARTNERSHIP ANNUAL REPORT 1998



CALLAWAY LAND & CATTLE CO. LIMITED PARTNERSHIP

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

TO THE PARTY OF TH

DOCUMENT # A94000001671

DIVISION OF CORPORATIONS 97 DEC 22 PM 4: 12



				$1 - \frac{9012/29}{12}$	
Malling Address	Principal Office Address		3. Date Formed of Registered	58. Capital Contributions as Shown on record.	
2160 RESERVE PARK TRACE	2160 RESERVE PARK TRACE PORT ST. LUCIE FL 34986		12/08/1994	614 COO EEC OO	
PORT ST. LUCIE FL 34986			38. Date of Last Report	\$11,603,556.00	
			12/27/1996	5b. Amount of Capital Contributions in FLORIDA	
2. Malling Address 28. Principal Office Address			4. State or Country of Formation	to date:	
			FL		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For	
City & State	City & State		59-3281214	Not Applicable	
-			7. Certificate of Status Desired	\$8.75 Additional Fee Required	
Zip 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			
FEE, FRANK H III 401-A SOUTH INDIAN RIVER DRIVE FORT PIERCE FL 34950		Name			
		Street Address (P.O. Box Number Is Not Acceptable)			
		Suite, Apt. #, etc.			
		City		Zıp Code	
		<u></u>		<u>FL</u>	
10a. Pursuant to the provisions of sections 620.1051 for the purpose of changing its registered office agent. I am familiar with, and accept the obliga	or registered agent, or both, in the State of Flo	ed limited partnership or orida. Such change was	ganized or registered under the laws of the authorized by its general partner(s). I her	ne State of Florida, submits this statement oby accept the appointment of registered	
SIGNATURE (Registered Agent Accepting Appointment)			DATE		
Á GENERAL PARTNER THA MU	IT IS A CORPORATION, I IST BE REGISTERED AN	LIMITED PAP ID ACTIVE W	RTNERSHIP OR OTHE TITH THIS OFFICE.	R BUSINESS ENTITY	
11. Name(s) of General Partner(s)	11a. Address of Each Genora (Do NOT Use Post Office Bo	al Partner ox Numbers) 11b	. City, State & Zip Code	11c. Registration/	
CALLAWAY LAND & CATTLE CO.,	2160 RESERVE PARK TR		DRT ST. LUCIE FL 349	665938	
•					
			700002	9853172 79701021004	
			-12/30 ****5	/\$701021004 41.25 ****541.25	

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

I do hereby certify that the information supplied with this filling 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 logal offects as if made under eath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as equired by chapter 620, Florida Statutes

SIGNATURE

W. Holcomb

11/25/97 561-468-4604