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

LIMITED PARTNERSHIP ANNUAL REPORT 1999

SIGNATURE 101

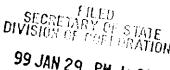
Typed or Printed Name of General Partner Signing Form



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS



	_ -			- 39 JAN 20 A.		
1. Name of Limited Partnership	1a. DOCUMENT # A9500000532		as Jan 29 PM 1: 35			
BLT OF NORTH FLORIDA, LTD.			mining 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capita	Contributions as	
2527 APALACHEE PARKWAY	2527 APALACHEE PARKWAY		04/03/1995	Shown on record.		
TALLAHASSEE FL 32301	TALLAHASSEE FL 32301			\$265,005.00 5b. Amount of Capital Contributions in FLORIDA to date:		
			01/02/1998			
2. Malling Address 3783 HARTSTIRLERS	2a. Principal Office Address		4. State or Country of Formation			
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	<u>i</u>	Applied For	
City & State	City & State	·····	59-3357451	Not Applicable		
Tollohassat, 1-C-	Zip Country		7. Certificate of Status Desired		\$8.75 Additional Fee Required	
39303 Country 'USA			8. Make check payable to Dept. of	pt. of State (See reverse side for fee Information)		
			40			
Name and Address of Current Registered Agent Name			10. If changed, new Registered Agent/Office			
SMITH, HAROLD A	Stre	et Address (P.O. B	Some 15 lox Number Is Not Acceptable) / //	,		
2527 APALACHEE PARKWAY	3783		Hongstiald 10	<i>حا</i>		
TALLAHASSEE FL 32301		Suite Apt. W. etc.				
	in that		ASSAL	FL プラス03		
10a. Pursuant to the provisions of sections 620.1051 and for the purpose of changing its registered office or respent. I am familiar with, and accept the obligations of SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT MUST	gistered agent, or both, in the State of Florida. Suc of section 620.192, Florida Statutes.	th change was aut	DATE	y accept the app	contrnent of registered	
11. Name(s) of General Partner(s)	11a. Address of Each General Partne (Do NOT Use Post Office Box Number	er bers) 11b.	City, State & Zip Code	11c.	Registration/ Document Number	
SMITH, HAROLD A	2527 APALACHEE PARKWA		TALLAHASSEE FL 32301			
•			200002 -02/06 ****5	767: 3/9901 26:25	L \$122 \$1 022026 ****\$26, 25	
1						
Note: General partners MAY NOT						
 I do hereby certify that the information supplied with this Corporations from any liability of non-compliance with \$ 						

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.