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

LIMITED PARTNERSHIP **ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

97 DEC 29 AM 9: 15



	A9500000	0584	 	
TURTLE CREEK, LTD.				
Mailing Address P.O. BOX 369 BONITA SPRINGS FL 34133-0369	Principal Office Address Principal Office Address BONITA BEACH HOAD BONITA SPRINGS FL 34134	5 BONTA BRACK HOAD		5a. Capital Contributions as Shown on record. \$3,722,000.00 5b. Amount of Capital Contributions in Ft ORIDA to date:
2. Mailing Address				
Sulte, Apt. #, etc. City & State	Suite, Apt. #, etc.			Applied For Not Applicable
Z ip Country	ZHIZH-			\$8.75 Additional for Required State (See reverse side for fee information
9. Name and Address of Current Registered Agent		10. If changed, new Registered Agent/Office		
ERDMAN, GREG 3575 BONITA BEACH ROAD		,	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc	
BONITA SPRINGS FL 34134		City FL 7ip Code		
10a. Pursuant to the provisions of sections 620.16 for the purpose of changing its registered of	951 and 620,192, Florida Statutes, the above-n fice or registered agent, or both, in the State o	amod limited partnership orga f Florida. Such change was au	anized or registered under the laws of the	e State of Florida, submits this statement

agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes

StQNATURE (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.

J C HOUSING, INCORPORATED

Name(s) of General Partner(s)

11.

11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)

11b.

City, State & Zip Code

11c.

Registration/

-8576-BONITA-BEACH-ROA

BONITA SPRINGS FL-841

P95000020775

3645 Bonita Beach Road SW Suite 3

34134

100002399841--1 -01/14/98--01063--015

****550.00 ****550.00

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 T 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 legal effects as if made under eath. Hurther certify thal I am a General Partner of the limited partnership, receiver or trustee empowered to execute this port as required by chapter 620, Florida Statute

SIGNATURE

DATE 12-3-97

me Telephone Number 941 - 992 -8833