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

FILED

1999	DIVISION OF CO		98 DEC	29 PM 4: 30	
1. Name of Limited Partnership	1a. DOCUMENT # A95000001558		SECRET TALLAH	SECRETARY OF STATE TALLAHASSEE, FLORIDA	
KYNG'S HEATH CENTER III, LTD.					
Mailing Address 284 PARK AVENUE NORTH WINTER PARK FL 32789	Principal Office Address 284 PARK AVENUE NORTH WINTER PARK FL 32789		3. Date Formed or Registered 10/10/1995 3a. Date of Last Report 12/19/1997	5a. Capital Contributions as Shown on record. \$815,751.42 5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	to date:	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 59-3340754	Applied For Not Applicable	
City & State	City & State		7. Certificate of Status Desired	\$8.75 Additional Fee Required	
Zip Country	Zip Country		8. Make check payable to: Dept. of S	State (See reverse side for fee information)	
9. Name and Address of Current Registered Agent			10. If changed, new Registered	Agent/Office	
KINGSLAND, ROBERT S 284 PARK AVENUE NORTH WINTER PARK FL 32789		Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City Zip Code			
10a. Pursuant to the provisions of sections 620,1051 and of for the purpose of changing its registered office or regagent. I am familiar with, and accept the obligations of SIGNATURE (Registered Agent Accepting Appointment)	istered agent, or both, in the State of Florid				
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 x Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number	
FRAMDEED COWS, INC.	284 PARK AVENUE NORTH		WINTER PARK FL 32789	V38458	
÷ j			3000027 -01/15// ****520	9901127017 6.25 ****526.25	
			7. J	.C. JAN 1 4 1999	
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 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 620, Florida Statutes. SIGNATURE DATE DATE					

Typed or Printed Name of General Partner Signing Form Frandend Cours Toc. -G.P.- Dan Pleur Date Telephone Number 407-6019-6044