FILE ON OR BEFORE APRIL 8,1998 TO AVOID REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

na. DÖCUMENT # **A9500001596**

THE FAIRWAYS OF QUAIL HOLLOW, LTD.

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 MAR - 9 PM 12: 43



Mailing Address 5339 VILLAGE MARKET	Principal Office Address 5339 VILLAGE MARKET		3. Date Formed or Registered 58. Capital Contriguence Shown on rec			
WESLEY CHAPEL FL 33543	WESLEY CHAPEL FL 33543		3a. Date of Last Report 03/20/1997 5b. Amount of Capital Contributions in FLORIDA			
2. Mailing Address	28. Principal Office Address		4. State or Country of Formation	to date:		
Suite, Apt. #, etc.	Suite, Apt. #, etc.				Applied For	
City & State Zip Country	City & State Zip Cou	ntry	7. Certificate of Status Desired		\$8.75 Additional Fee Required	
			8, Make check payable to: Dept. of State (See reverse side for fee Information)			
9. Name and Address of Cur	rent Registered Agent		10. If changed, new Registere	d Agent/Office		
O'MALLEY, ANDREW M 100 SOUTH ASHLEY DRIVE, SUITE 1190		Name				
		Street Address (P.O. Box Number (a Not Acceptable)				
TAMPA FL 33602	Su	ilte, Apt. #, etc.	9tc.			
	Cit	ty	Zip Code			
SIGNATURE (Registered Agent Accepting Appointment A GENERAL PARTNER THA MU) AT IS A CORPORATION, LIM IST BE REGISTERED AND A	ITED PAR	INERSHIP OR OTHE THIS OFFICE.		IESS ENTITY	
11. Name(s) of General Partner(s)	11a. Address of Each General Parti (Do NOT Use Post Office Box Nun	ner 11b.			Registration/ Document Number	
CHAPEL DEVELOPMENT, INC.	5339 VILLAGE MARKET	w	WESLEY CHAPEL FL 3354		P95000056754	
			200002 -03/13 *****5	4566 3/8801 26.25	3 1 21 078019 ****526.25	
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			<u>ve</u>			
Note: General partners MAY No						
Corporations from any liability of non-compliance	with this filing is voluntarily furnished and does not qual with Section 119.07(3)(k) in the event that the Informa by signature shall have the same legal effects as if made chapte; 620, Florida Statutes.	tion supplied is dee	med exempt from public access. I furth ner certify that I am a General Partner o	er certify that the f the limited part	a information Indicated on nership, receiver or trustee	
SIGNATURE	St. Rus.		DATE	3/5/	58	
Typed or Printed Name of General Pages Signifin Form	O Cindu Merce . H.	Besident	Davtime Telephone Number (3	9(3) 97	3-/318	