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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 DEC 29 AM 9:36

1. Name of Limited Partnership

ZOM TOWN AND COUNTRY, LTD.

1a. DOCUMENT # A95000001615

Mailing Address
~~2269 LEE ROAD~~
~~WINTER PARK FL 32789~~

Principal Office Address
~~2269 LEE ROAD~~
~~WINTER PARK FL 32789~~

3. Date Formed or Registered: 10/26/1995

3a. Date of Last Report: 01/03/1997

4. State or Country of Formation: FL

5a. Capital Contributions as Shown on record: $1,574,990.00

5b. Amount of Capital Contributions in FLORIDA to date:

2. Mailing Address: 1950 Summit Park Drive
Suite, Apt. #, etc.: Suite 300
City & State: Orlando, FL
Zip: 32810 Country:

2a. Principal Office Address: 1950 Summit Park Drive
Suite, Apt. #, etc.: Suite 300
City & State: Orlando, FL
Zip: 32810 Country:

6. FEI Number: 59-3327692 ☐ Applied For ☐ Not Applicable

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 Current Registered Agent

BOSCHMANS, ERIC F
~~2269 LEE ROAD~~
~~WINTER PARK FL 32789~~

10. If changed, new Registered Agent/Office

Name: Boschmans, Eric F.J.
Street Address (P.O. Box Number is Not Acceptable): 1950 Summit Park Drive
Suite, Apt. #, etc.: Suite 300
City: Orlando FL Zip Code: 32810

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) _____ DATE 10/13/97

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 (Do NOT Use Post Office Box Numbers)	**11b.** City, State & Zip Code	**11c.** Registration/ Document Number
ZOM PROPERTIES, INC.	~~2269 LEE ROAD~~ 1950 Summit Park Drive Suite 300	~~WINTER PARK FL 32789~~ Orlando, FL 32810	613657

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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 9/29/97

Typed or Printed Name of General Partner Signing Form: Samuel C. Stephens, III, President

Daytime Telephone Number: (407) 644-6300

CR2E003 (6/97)