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

Socretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT #

DIVISION OF CORPORATIONS

98 JAN 26 AM 9: 24

Mailing Address Principal Office Address 3. Date Formed or Registered Shown on record. \$2. Capital Contributions as Shown on record. \$3. Date Formed or Registered \$3. Date Formed or Registered \$4. Capital Contributions as Shown on record. \$4. Capital Contributions as Shown on record.		A95000001933			L MARIJAN NAJA NAKA CINN BANK BANK BANK BANK DANK NAKA NAKA NIKA NIKA NIKA			
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2. Mailing Address 28. Principal Office Address Suite, Apt. 4, etc. Suite, Apt. 4, etc. City & State To Country Zip Country R. Make check payable to: Dept. of State (See revenes side for fee information) 8. Make check payable to: Dept. of State (See revenes side for fee information) 8. Make check payable to: Dept. of State (See revenes side for fee information) 8. Make check payable to: Dept. of State (See revenes side for fee information) 8. Make check payable to: Dept. of State (See revenes side for fee information) 8. Make check payable to: Dept. of State (See revenes side for fee information) 8. Make check payable to: Dept. of State (See revenes side for fee information) 8. Make check payable to: Dept. of State (See revenes side for fee information) 8. Make check payable to: Dept. of State (See revenes side for fee information) 8. Make check payable to: Dept. of State (See revenes side for fee information) 8. Make check payable to: Dept. of State (See revenes side for fee information) 8. Make check payable to: Dept. of State (See revenes side for fee information) 8. Make check payable to: Dept. of State (See revenes side for fee information) 8. Make check payable to: Dept. of State (See revenes side for fee information) Sould payable to: Dept. of State (See revenes side for fee information) Sould payable to: Dept. of State (See revenes side for fee information) Sould payable to: Dept. of State (See revenes side for fee information) Sould payable to: Dept. of State (See revenes side for fee information) Sould payable to: Dept. of State (See revenes side for fee information) Sould payable to: Dept. of State (See revenes side for fee information) Sould payable to: Dept. of State (See revenes side for fee information) Sould payable to: Dept. of State (See revenes	350 WEST CAMINO GARDENS BLVD SUITE 303 BOCA RATON FL 33432			13	3a. Date of Last Report 01/08/1997	5b. Amount of Capital Contributions in FLORIDA to date:		
City & State City & State (See reverse side for fee Information) P. Marke check payable to Dept. of State (See reverse side for fee Information) Name Street Address (P.O. Box Number Is Not Acceptable) Street Address (P.O. Box Number Is Not Acceptable) State April 10. If changed, new Registered AgendOffice City & FL Tip Code 10a. Pursuant to the provisions of sections 670 1051 and 670 192. Foods Statutes, the above-named limited partmership organized or registered under the laws of the State of Florida, submis bits statement for the purpose of changing as registered officer or registered agent the displanation of section 670 192. Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment) DATE A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Name(c) of General Partmer(s) 12. Pegaterior Partmer(s)	2. Mailing Address	2a. Principal Office Address	28. Principal Office Address		•			
City & State City & State City & State City & State Country Zip Country Zip Country Zip Country B. Make check payable to: Dept. of Status Desires B. A6 Applicable To Country B. Make check payable to: Dept. of State (See reverse side for fee Information) P. Name BOCA GOLF VIEW DEVELOPERS, INC. 350 WEST CAMINO GARDENS BLVD., SUITE 303 BOCA RATON FL 33432 Sine. Apr. 4. etc. City FL Zip Code City FL Zip Code City FL Zip Code To the purpose of changing fair registered agent, or both, in the State of Florida. Such change was substrated unset the laws of the State of Florida, sub-risk this statement for the purpose of changing fair registered upon the laws of the State of Florida. Such change was substrated by its general partner(s). I hereby accept the epiglishered agent, i am familiar with, and accept the obligations of section 600 192, Florida Statutes. BIGNATURE (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. 11. Name(s) of General Partner(s) 11a. OblIC State Registered Register Partner BOCA GOLF VIEW DEVELOPERS, I 350 WEST CAMINO GARDE BOCA RATON FL 33432 P95000093959 Note: General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			Applied For		Applied For	
Pursuant to the provisions of sections 620 192. Florida Statutes, the above-named limited partnership organized by its general partner(s). I hereby accept the appointment of registered Appril and accept the obligators of election 620 192. Florida Statutes. Pursuant to the provisions of sections 620 1931 and 620 192. Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Brods, submits this statement for the purpose of changing its registered office or registered apent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered apent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent, and accept the obligators of section 620 192, Florida Statutes. SIGNATURE (Registered Apent Accepting Appointment)	City & State	City & State			65-0626574			
9, Name and Address of Current Registered Agent BOCA GOLF VIEW DEVELOPERS, INC. 350 WEST CAMINO GARDENS BLVD., SUITE 303 BOCA RATON FL 33432 Suite, Apr. 1. etc. City FL Zip Code Tot 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). Thereby accept the appointment of registered agent, and accept the obligations of section 800 192. Florida Statutes. Signature: (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. 11. Name(s) of General Partner(s) 11. Name(s) of General Partner(s) 11. Name(s) of General Partner(s) 350 WEST CAMINO GARDE 80CA GOLF VIEW DEVELOPERS, I 350 WEST CAMINO GARDE 80CA RATON FL 33432 P98000093959 1001024 165521—65 -01/23/3801109005 ********\$26. 25 *******\$26. 25 ***********************************	Zip Country	Zip	Zip Country		Fee Required			
BOCA GOLF VIEW DEVELOPERS, INC. 350 WEST CAMINO GARDENS BLVD., SUITE 303 BOCA RATON FL 33432 Total Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits its statement for the purpose of changing as registered office or registered agent, or took, in the State of Florida. Such change was surforized by its general partner(s). Thereby accept the appointment of registered agent, or took, in the State of Florida. Such change was surforized by its general partner(s). Thereby accept the appointment of registered agent, and target with a discovery the obligations of section 670-192, Florida Statutes. BIGNATURE (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. 11. Name(s) of General Partner(s) 11. Solve State A 2p Code 11. Chy, State A 2p Code 11. Peglaretion of Decomposition of State A 2p Code 11. Chy, State A 2p Code 12. Chy, State A 2p Code 13. Chy, State A 2p Code 14. Chy, State A 2p Code 15. Chy, State A 2p Code 16. Chy, State A 2p Code 17. Chy, State A 2p Code 18								
Side Address (P. O. Box Number is Not Acceptable) Sulfe, Apt. 4. etc. City FL Zip Code 10a. Purtuant to the provisions of sections 620 1051 and 620 192. Floride 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 agent, or both, in the State of Florida. Such change was authorized by its general partner(s). Thereby accept the appointment of registered agent, a remaining with, and accept the obligations of section 620 192. Florida Statutes. SIGNATURE (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. 11. Name(s) of General Partner(s) 11a. Address of Each General Partner BOCA GOLF VIEW DEVELOPERS, I 350 WEST CAMINO GARDE 80CA RATON FL 33432 P95000093959 1000024 155 21 - 8 -01/29/36-01109-005 *******526. 25 ******526. 25 ******526. 25	BOCA GOLF VIEW DEVELOPERS, INC. 350 WEST CAMINO GARDENS BLVD., SUITE 303		Name					
Solite, Apt. #, etc. Cay FL Zip Code Total, Pursuant to the provisions of acctions 820 1051 and 820 192. Florids Statutes, the above-named limited partmership 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). Thereby accept the epipointment of registered agent. I am familiar with, and accept the obligations of section 620 192, Florida Statutes. SIGNATURE (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. 11. Name(s) of General Partner(s) 11a. (Name(s) of General Partner(s) 11b. City, State & Zip Code 11c. Projectorion Document Number BOCA GOLF VIEW DEVELOPERS, I 350 WEST CAMINO GARDE BOCA RATON FL 33432 P95000093959 10002415521—8 -01/23/98—01103—005 ******526.25 ******526.25 ******526.25			Streel Address (P.O. Box Number Is Not Acceptable)					
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) 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 MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11b. City. State & Zip Code 11c. Pregistration/ Document Number BOCA GOLF VIEW DEVELOPERS, I 350 WEST CAMINO GARDE BOCA RATON FL 33432 P95000093959 1000024 165521S -01/23//3801109005 ********526.25 *******526.25			Suite, Apt. #, etc.					
Pursuant to the provisions of sections 620 192. Florids 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 of both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent Accepting Appointment) DATE 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 (s) 11b. City. State & Zip Code 11c. Registration/ Document Number BOCA GOLF VIEW DEVELOPERS, I 350 WEST CAMINO GARDE BOCA RATON FL 33432 P95000083959 100024 165521 - 8 -01/29/9801109005 *******526.25 ******526.25 ******526.25			City Zip Code					
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####\$26.25 ####\$26.25 BOCA RATON FL 33432 P95000093959 100024 16521—8 -01/29/98-01109-005 ####\$26.25 ####\$26.25 Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.						11c		
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this annual report is true and accurate and thurmy 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 is reported by chapter 620. Florida Statutes.

SIGNATURE .

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number