

**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
98 JAN 13 PM 3:39



1. Name of Limited Partnership		1a. DOCUMENT # A95000002045	
WESTGATE DAYTONA, LTD.			
Mailing Address 5601 WINDHOVER DRIVE ORLANDO FL 32819		Principal Office Address 5601 WINDHOVER DRIVE ORLANDO FL 32819	
2. Mailing Address		2a. Principal Office Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip Country		Zip Country	
3. Date Formed or Registered 12/26/1995		5a. Capital Contributions as of 12/26/1995 \$2,191,187.00	
3a. Date of Last Report 03/17/1997		5b. Amount of Capital Contributions in FLORIDA to date: \$2,191,187	
4. State or Country of Formation FL		6. FLL Number 59-3350612	
7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
8. Make check payable to: Dept. of State (See reverse side for fee information)			

9. Name and Address of Current Registered Agent		10. If changed, new Registered Agent/Office	
MARDER, MICHAEL 100 WEST CYPRESS CREEK RD, STE. 700 FT. LAUDERDALE FL 33309		Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City	
		000002400600-9 01/14/98-01109-020 ***541.25 ***541.25 FL Zip Code	

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

**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
WESTGATE DAYTONA, INC.	5601 WINDHOVER DRIVE	ORLANDO FL 32819	P95000096528

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 David A. Siegel, as President of General Partner
Typed or Printed Name of General Partner Signing Form Westgate Daytona, Inc.

DATE 12/20/97
407-351-3350

Daytime Telephone Number

CR2E003 (5/97)