

FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra McMath Secretary of State DIVISION OF CORPORATIONS	
1. Name of Limited Partnership <i>Shannon Lakes-Kissimmee Limited Partner- ship</i>		1a. DOCUMENT # <i>A96000000100</i>	

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DIVISION OF CORPORATIONS

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2. Mailing Address <i>Mark Boroth</i>		2a. Principal Office Address <i>James Griffin</i>		3. Date Formed or Registered	5a. Capital Contributions as Shown on record. <i>\$100</i>
Suite, Apt. #, etc. <i>116830 Ventura Blvd, Suite 352</i>		Suite, Apt. #, etc. <i>7575 Dr. Phillips Blvd #230</i>		3a. Date of Last Report	5b. Amount of Capital Contributions in FLORIDA to date <i>\$1,001,645.66</i>
City & State <i>Encino, CA</i>		City & State <i>Orlando, FL</i>		4. State or Country of Formation	6. FEI Number <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip <i>91436</i>		Zip <i>32819</i>		Country	7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
8. Make check payable to: Dept. of State (See reverse side for fee information) <i>\$576.25</i>					

9. Name and Address of Current Registered Agent		10. If changed, new Registered Agent/Office	
		Name <i>James Griffin</i>	
		Street Address (P.O. Box Number is Not Acceptable) <i>7575 Dr. Phillips Blvd</i>	
		Suite, Apt. #, etc. <i>Suite 230</i>	
		City <i>Orlando</i>	
		FL	Zip Code <i>32819</i>
10a. Pursuant to the provisions of sections 600.1051 and 600.1052, 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 600.1052, 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
<i>Shannon Lakes-Kissimmee G.P., L.C.</i>	<i>7575 Dr. Phillips Blvd. Suite 230</i>	<i>Orlando, FL 32819</i>	<i>L96000000045</i>
<i>900002059999--0</i> <i>-01/16/97--01025--004</i> <i>****576.25 ****576.25</i>			
<i>dec 576.25</i>			

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 *Please see attached signature block.*

DATE *12/18/97*

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number *(818) 385-0005*

CR2E003 (6/96)

Limited Partnership Annual Report 1997

SHANNON LAKES-KISSIMMEE LIMITED PARTNERSHIP,
a Florida limited partnership

By: Shannon Lakes-Kissimmee GP, L.C.,
a Florida limited liability company
General Partner

By: Hearthstone Advisors, Inc.
a California corporation
Manager

By: Richard O. Werner
Richard O. Werner
Chief Executive Officer

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