


**FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP ANNUAL REPORT 1999		 <p>FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS</p>		<p>FILED 98 DEC 30 PM 2: 23 SECRETARY OF STATE TALLAHASSEE, FLORIDA</p>	
1. Name of Limited Partnership CONROY HOUSING PARTNERS, LTD.		1a. DOCUMENT # A96000000123 <i>99-APC</i>			
Mailing Address C/O BROAD AND CASSEL P.O. BOX 4961 ORLANDO FL 32802-4961		Principal Office Address 2200 LUCIEN WAY, SUITE 450 MAITLAND FL 32751		3. Date Formed or Registered 01/17/1996	
2. Mailing Address Suite, Apt. #, etc. City & State Zip Country		2a. Principal Office Address 1551 SANDSPUR ROAD Suite, Apt. #, etc. City & State MAITLAND, FLORIDA Zip Country 32751 USA		3a. Date of Last Report 12/04/1997	
4. State or Country of Formation FL		5a. Capital Contributions as Shown on record. \$4,937,205.00		5b. Amount of Capital Contributions in FLORIDA to date:	
6. FEI Number 59-3355576		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable		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)					
9. Name and Address of Current Registered Agent B&C CORPORATE SERVICES OF CENT. FL, INC. 390 N. ORANGE AVE., SUITE 1100 ORLANDO FL 32801			10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City 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	
FL BOND CAPITAL HOLDINGS 96,		2200 LUCIEN WAY, SUITE 1551 SANDSPUR ROAD		MAITLAND FL 32751	
11c. Registration/Document Number		A96000000118			
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.					
By: <u>FL Bond Capital Holdings 96, Ltd.</u> By: <u>CEB Construction, Inc.,</u> general partner					
SIGNATURE _____ DATE _____					
Typed or Printed Name of General Partner Signing Form <u>Tricia Doody, VP</u> Daytime Telephone Number _____					

CR2E003 (8/98)