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

LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT# A9600000172

SECRETARY OF STATE DIVISION OF CORPORATIONS 98 NOV 30 PM 2: 20

JHH HARRIS ENTERPRISES, LTD.			· - 1 2 /4				
Mailing Address	Principal Office Address		3.	Date Formed or Registered	5a. Capit	al Contributions as	
5150 TAMIAMI TRAIL NORTH SUITE 502 NAPLES FL 34103	5150 TAMIAMI TRAIL NORTH SUITE 502 NAPLES FL 34103			01/25/1996 2. Date of Last Report 12/01/1997	\$6,000,000.00 5b. Amount of Capital Contributions in FLORIDA		
			4.	4. State or Country of Formation		Contributions in FLORIDA to date:	
2. Mailing Address	2a. Principal Office Address			FL.	\$6,	,000,000.00	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			FEI Number		Applied For	
City & State	City & State			65-0640703		Not Applicable	
Zip Country	Zip Country		/.	Certificate of Status Desired		\$8.75 Additional Fee Required	
	8. Make check payable to: Dept. of State (See reverse side for fee in				erse side for fee information)		
9 Name and Address of Current Re	9. Name and Address of Current Registered Agent			10. If changed, new Registered Agent/Office			
GOODMAN, KENNETH D		Name					
		Street Address (P.O. Box Number Is Not Acceptable)					
GOODMAN & BREEN 5551 RIDGEWOOD DR., STE. 405		Suite, Apt. #, etc.					
NAPLES FL 34108	City			Zip Code		Zip Code	
		-			<u>FL</u>		
10a. Pursuant to the provisions of sections 620.1051 and 63 for the purpose of changing its registered office or registered of the obligations of the contract of	stered agent, or both, in the State of Florid	i limited partner a. Such change	ship organized was authorized	or registered under the laws of the d by its general partner(s). I hereby	accept the ap	ppointment of registered	
SIGNATURE (Registered Agent Accepting Appointment)				DATE_			
A GENERAL PARTNER THAT IS MUST	S A CORPORATION, L BE REGISTERED ANI	IMITED DACTIV	PARTNE E WITH	ERSHIP OR OTHEI THIS OFFICE.	R BUSI	NESS ENTITY	
11. Name(s) of General Partner(s)	11a. Address of Each General	Partner	11b.	Clty, State & Zip Code	11c.	Registration/ Document Number	
HARRIS, JOHN H	* 5811 PELIGAN BAY BLVD		-NAPLES FL 94108				
HARRIS, LUCILE H	* 5811 PELICAN BAY BLVD		-NAPLES FL 94108				
*	5150 Tamiami Tr N.	, #502	Naple	s, FL 34103-282	22	Š	
r f				6000027 -12/07/9 ****52	1053 3801 6.25	:861 166016 ****\$26.25	

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 shallmave the same legal effects as if made under cath, I further certify that I am a General Partner of the limited partnership, receiver or trustee

CIC	M	ATI	i ID	

Typed or Printed Name of Ge eral Partner Signing Form JOHN H. HARRIS

DATE_November 19, 1998 941-430-0570