## FILE ON OR BEFORE APRIL 7, 1999 TO AVOID REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # A96000000286

JB PARTNERSHIP OF ST. AUGUSTINE, LTD.



1009 A1A BEACH BOULEVARD  ST. AUGUSTINE FL 32084  2. Mailing Address  2a. Principal Office Address  FL  Suite, Apt. #, etc.  City & State  City & State  Country  2ip Country  1009 A1A BEACH BOULEVARD  ST. AUGUSTINE FL 32084  1009 A1A BEACH BOULEVARD  St. AUGUSTINE FL 32084  1009 A1A BEACH BOULEVARD  St. AUGUSTINE FL 32084  112/30/1997  4. State or Country of Formation  FL  Suite, Apt. #, etc.  6. FEI Number  59-3360611  Applied For Not Applicable  7. Certificate of Status Desired  \$8.75 Additional Fee Required	JB PARTNERSHIP OF ST. AU	GUSTINE, LTD.			
2. Mailing Address  2. Mailing Address  2. Mailing Address  2. Mailing Address  2. Suite, Apt #, etc.  Suite, Apt #, etc.  Suite, Apt #, etc.  City & State  Country  2. Country  2. Country  2. Country  2. Country  3. Name and Address of Current Registered Agent  10. If charged, new Registered Agent Fee Register  JONES, KATHERINE G  780 N. PONCE DE LEON BLVD.  ST. AUGUSTINE FL 32084  Suite, Apt #, etc.  City & State State Suite, Apt # and a Country State State in the Book-named Irrind grammark or impatient under the laws of the State State in the State of Florida. Such change was authorized by its general partner(s) I hereby accept the appointment of registered Agent April 12. City State In a familiar with, and accept the obligations of section 920.192. Florida State in Florida. Such change was authorized by its general partner(s) I hereby accept the appointment of registered Agent Accepting Appointment of Inc. Discontine Florida.  AGENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTIL MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  12. Application of Adent Accepting Appointment Country Inc. Page Agent Accepting Appointment Country Inc. Department of Inc. Discontine Florida Such All Beach Bouley  ST. AUGUSTINE FL 3208  P98000009584				1	
Suite, Apt #, etc.   Soute,	ST. AUGUSTINE FL 32084	ST. AUGUSTINE FL 32084		12/30/1997	5b. Amount of Capital Contributions in FLORIDA
City & State  Ci	2. Mailing Address	2a. Principal Office Address			10 date
Zip Country  Zip				1	
Zip Country  2.p Country  8, Make chieck payable to Dept of State (See reverse side for fee informal partners)  9. Name and Address of Current Registered Agent  10. If changed, new Registered AgentOffice  Name  10. If changed, new Registered AgentOffice  Name  Streat Address (P.O. Box Number is Not Acceptable)  DATE  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITED ACCEPTABLE (Pagistered Agent Accept partner(s) Interest Partner  MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  11a. (Do NOT Use Post Office Box Numbers)  11b. City, State & Zip Code  11c. Registration Document Number  PREGISTER Is 6 1999.	City & State	Uny & State			- <u>- i i i i i i i i i i i i i i i i i i</u>
JONES, KATHERINE G 780 N. PONCE DE LEON BLVD. ST. AUGUSTINE FL 32084  Streel Address (P.O. Box Number is Not Acceptable)  Streel Address (P.O. Box Number is Not Acceptable)  Stille, Apr #. etc.  City  Pursuant to the provisions of sections 620, 1051 and 620, 192. Florida Statutes, the above-named limited partnership organized or registered under the taws of the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent, and accept the obligations of section 620, 192. Florida Statutes.  BIGNATURE (Registered Agent Accepting Appointment)  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITED MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  11a. (Address of Each General Partner (b)  CEAN VILLAGE DEVELOPMENT CO  1009 A1A BEACH BOULEV  ST. AUGUSTINE FL 3208  P96000009584	Zip Country	Zip C	ountry	Fee Required  8. Make check payable to Dept of State (See reverse side for fee information	
JONES, KATHERINE G 780 N. PONCE DE LEON BLVD. ST. AUGUSTINE FL 32084  Suile, Apt #. etc	9, Name and Address of Current	10. If changed, new Registered Agent/Office			
Toty  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, a manifer with, and accept the obligations of section 620.192, Florida Statules.  In 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 Statules.  In the State of Florida. Such change was authorized by its general partner(s). In hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statules.  In the State of Florida. Such change was authorized by its general partner(s). In the Partner of Part	780 N. PONCE DE LEON BLVD.		Streel Address (P.O. Box Number Is Not Acceptable)		
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 Statules.  BIGNATURE (Registered Agent Accepting Appointment).  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITED MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s).  11a. Address of Each General Partner  OCEAN VILLAGE DEVELOPMENT CO.  11b. City. State & Zip. Code.  11c. Registration/ Document Number  P96000009584  P96000009584  FEB. 1 6 19990.			-02/19/9901091005		
11. Name(s) of General Partner(s)  11a. Address of Each General Partner COCEAN VILLAGE DEVELOPMENT CO  1009 A1A BEACH BOULEV  ST. AUGUSTINE FL 3208  P96000009584  AL FEB 1 6 1999.	for the purpose of changing its registered office or re agent. I am familiar with, and accept the obligations SIGNATURE (Registered Agent Accepting Appointment).  A GENERAL PARTNER THAT	agistered agent, or both, in the State of Florida of section 620.192, Florida Statutes.  IS A CORPORATION, LI	Such change was au	DATE  TNERSHIP OR OTHE	y accept the appointment of registered
AL FEB 1 6 1999.					
100 1000	OCEAN VILLAGE DEVELOPMENT CO	1009 A1A BEACH BOUL	EV	ST. AUGUSTINE FL 3208	
100 1000	•			Δt	Erp. 1.4.1000
	Note: Congrel partners MAV NOT	be changed on this for-			

1. I do hereby certify that the information supplied with this fiting is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Fiorida 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

Typed or Printed Name of General Partner Signing Form

a Statutes.

John F. Jamus J.

ATE 2-11-99

Daytime Telephone Number

CR2E003 (12/98)