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

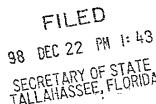
LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS



- Series				38 DEC .			
1. Name of Limited Partnership	1a. DOCUMENT # A9600000604			SECRETARY OF STATE TALLAHASSEE, FLORIDA			
LAKE POINT CENTRE ASSOCIATES, LTD.							
Mailing Address	Principal Office Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.		
C/O KONOVER & ASSOCIATES SOUTH, INC. 7000 WEST PALMETTO PARK ROAD, SUITE 408 BOCA RATON FL 33433	C/O KONOVER & ASSOCIATES SOUTH. INC. 7000 WEST PALMETTO PARK ROAD. SUITE 408 BOCA RATON FL 33433			03/28/1996 3a. Date of Last Report 01/09/1998	\$3,450,000.00 5b. Amount of Capital Contributions in FLORIDA to date:		
2. Mailing Address	2a. Principal Office Address			4. State or Country of Formation			
Suite, Apt. #, etc.	Suite, Apt. #, etc. City & State			6. FEI Number 65-0658429	Applied For Not Applicable		
City & State				7. Certificate of Status Desired	\$8.75 Additional Fee Regulred		
Zip Country	Zip Country			8. Make check payable to: Dept. of State (See reverse side for fee information)			
9. Name and Address of Current	Registered Agent	T		10. If changed, new Registered	Agent/Office		
STEINMARK, FRED P C/O KONOVER & ASSOCIATES SOUTH, INC.		Name					
		Street Address (P.O. Box Number is Not Acceptable)					
7000 WEST PALMETTO PARK ROAD, SUITE		Suite, Apt. #, etc.					
BOCA RATON FL 33433		City			FL Zip Code		
10a. Pursuant to the provisions of sections 620.1051 and for the purpose of changing its registered office or rejagent. I am familiar with, and accept the obligations of SIGNATURE (Registered Agent Accepting Appointment)	gistered agent, or both, in the State of Flori of section 620.192, Florida Statutes.	da. Such chang	ge was autho	orized by its general partner(s). I hereby	accept the a	pointment of registered	
A GENERAL PARTNER THAT I MUST	BE REGISTERED AN	D ACTIV	/E WIT	H THIS OFFICE.	K BUSI	NESS ENTITY	
11. Name(s) of General Partner(s)	11a. Address of Each Genera		11b.	City, State & Zip Code	11c.	Registration/ Document Number	
K. SOUTH, INC.	7000 W. PALMETTO PARI	7000 W. PALMETTO PARK		BOCA RATON FL 33422		(868) 995000085418 (875000 995000085418	
•				1000027338911 -01/07/9301102012 *****526.25 *****526.25			
	<u> </u>						
Note: General partners MAY NOT						·	
12, I do hereby certify that the Information supplied with this Corporations from any liability of non-compilance with S this annual report is true and accurate and that my signs empowered to execute this report as required by chapte	ection 119.07(3)(k) in the event that the infector shall have the same legal effects as if	imation suppli	ed is deeme	ed exempt from public access, I further	certify that the	information indicated on	
SIGNATURE Maria S. Ohn felt DATE 12/15/98							
Typed or Printed Name of General Partner Signing Form MARIN S. ASHENFELTER, V.P. Daytime Telephone Number 561-394-4224							
K. SOUTH, INC., G.P.							