


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 OAK CREST APARTMENTS OF KANNAPOLIS, LTD.		1a. DOCUMENT # A96000000665	
Mailing Address 1002 WEST 23RD STREET, SUITE 400 PANAMA CITY FL 32405	Principal Office Address 1002 WEST 23RD STREET, SUITE 400 PANAMA CITY FL 32405		
2. Mailing Address Suite, Apt. #, etc. City & State Zip Country	2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country		
3. Date Formed or Registered 04/08/1996		5a. Capital Contributions as Shown on record. \$3,102,793.00	
3a. Date of Last Report 12/29/1997		5b. Amount of Capital Contributions in FLORIDA to date:	
4. State or Country of Formation FL		6. FEI Number 59-3385149 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
7. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		8. Make check payable to: Dept. of State (See reverse side for fee information)	

FILED

98 DEC 29 PM 4:30

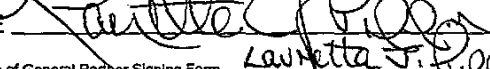
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



9. Name and Address of Current Registered Agent HENRY, ROBERT F III 1002 WEST 23RD STREET, SUITE 400 PANAMA CITY FL 32405		10. If changed, new Registered Agent/Office Name 500002741819-4 Street Address (P.O. Box Number is not acceptable) 01/14/98 01065 005 Suite, Apt. #, etc. ***44881.07 ***\$35.00 City FL 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	11c. Registration/ Document Number
ROYAL AMERICAN DEVELOPMENT,	1002 WEST 23RD STREET	PANAMA CITY FL 32405	598978 <i>FF \$526.25 CWS \$8.75</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  DATE **12/27/98**
Typed or Printed Name of General Partner Signing Form **Lavetta J. Popen Asst. Sec.** Daytime Telephone Number **850 769-8981**

CR2E003 (8/98)