FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # **A96000000701**

FILEO
SECRETARY OF STATE
DIVISION OF CORPORATION

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AISON-JUPITER FARMS LIMITED PARTNERSHIP				
Mailing Address 121 WEST TRADE STREET 1900 INTERSTATE TOWER CHARLOTTE NC 28202-5399	Principal Office Address ATTN: JOHN M. JOYCE 225 E. ROBINSON ST. ORLANDO FL 32801		3. Date Formed or Rogistered 04/04/1996 3a. Date of Last Report 10/18/1996	58. Capital Contributions as Shown on record. \$100.00 5b. Amount of Capital Contributions in FLORIDA
2. Mailing Address	28. Principal Office Address		4. State or Country of Formation	to date
Suite, Apt. #, etc.	Suite, Apt. #, etc.			Applied For Not Applicable
City & State Zip Country	City & State Zip Cor	7. Certificate of Status Desired Country 8. Make check payable to: Dept. of State		\$8.75 Additional Fee Required
9. Name and Address of Curr	ent Registered Agent		10, If changed, new Registere	d Agent/Office
JOYCE, JOHN M 225 E. ROBINSON ST., SUITE 500 ORLANDO FL 32801 10a. Pursuant to the provisions of sections 620 1051 for the purpose of changing its registered office agent. I am familiar with, and accept the obligat SIGNATURE (Registered Agent Accepting Appointment)	and 620.192, Florida Statutes, the above-named lin or registered agent, or both, in the State of Florida. ions of section 620.192, Florida Statutes	uite, Apt #, el bity iited partnersh Such change	ip organized or registered under the laws of the	eby accept the appointment of registered
A GENERAL PARTNER THA	T IS A CORPORATION, LIN ST BE REGISTERED AND	IITED P	ARTNERSHIP OR OTHE WITH THIS OFFICE.	R BUSINESS ENTITY
11. Name(s) of General Partner(s)	Address of Each General Par (Do NOT Use Post Office Box No	Iner Imbers) 1	1b. City, State & Zip Code	11c. Registration/ Document Number
FCD-JUPITER FARMS LIMITED PA	121 W. TRADE ST., 190		CHARLOTTE NC 28202 90002 -10/03 *****	B9600000120 2 3 1 1 7 7 7 7 025 3 9 7 7 7 025 156. 25 **** 186. 25
Note: General partners MAY NO)T be changed on this form; a	n amen	dment must be filed to ch	 ange a general partner
12. I do hereby certify that the information supplied with				_

Loo nevery derity that the information supplied with this liming is voluntarily furnished and odes not quality for the exemption stated in Section 119.07(3)(k). Fixing 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 decreased 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 eath. 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

E1 :

ASSISTANT SECRETARY

ELIZABETH M. SPEED

Daytime Telephone Number

7/29/91) 204 33/ 2500 CHZE003 (6/97