FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP

WILL BE SUBJECT TO REVO	CATION AND \$500 PENAL	TY FEE				
LIMITED PARTNERSHIP ANNUAL REPORT 1999	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			FILED 98 DEC 30 PH 1: 04		
1. Name of Limited Partnership	1a. DOCUMENT # A9600000777			SECRETARY OF STATE TALLAHASSEE, FLORIDA		
BARON STRATEGIC INVESTMENT FUND, LTD.						
Mailing Address	Principal Office Address	=		3. Date Formed or Registered	5a. Capital C	Contributions as n record.
% GREGORY K. MCGRATH	% GREGORY K. MCGRATH	_		04/24/1996	\$99.00	
7826 COOPER RD.	7826 COOPER RD.			3a. Date of Last Report	5b. Amount of Capital Contributions in FLORIDA to date:	
CINCINNATI OH 45242	CINCINNATI OH 45242			12/30/1997		
2. Mailing Address	2a. Principal Office Address			4. State or Country of Formation		
Suite, Apt. #, etc.	Suite, Apt. #, etc.			6. FEI Number		Applied For
City & State	City & State			58-2234675	Ţ	Not Applicable
				7. Certificate of Status Desired		\$8.75 Additional
Zip Country	Zip	Country		8. Make check payable to: Dept. of S	ate (See reverse	Fee Required side for fee information)
9. Name and Address of Current Registered Agent			10. If changed, new Registered Agent/Office			
SCHMERGE, MICHAEL		Nr ' 🌧				
28050-U.SHIGHWAY, 19-NORTH		s McG	McGrath, Gregory 4561 Gulf of Mexico Drive			n.
SUITE-301-		s #101 c Longboat Key, FL 34228				
CLEARWATER FL 34621				Zip Code		
					Land	
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)	Jugas/NE Kis	A		DATE_	12/22	98
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 Genera (Do NOT Use Post Office Bo	Partner x Numbers)	11b.	City, State & Zip Code	11c.	Registration/ Document Number
BARON CAPITAL XXXII, INC.	7826 Cooper Road		CINCINNATI OH 45242		P96000034956	
				500002 ⁻ -01/21/ ****14	7498 /99010 H.25 *	950 176006 ***141.25

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner. 12. do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 115.07(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 shell 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 fres. Typed or Printed Name of General Partner Signing Form