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

LIMITED PARTNERSHIP



FLORIDA DEPARTMENT OF STATE

ANNUAL REPORT 1999		Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		90 J/N 27 PM 2: 44		
1. Name of Limited Partnership	1a. A9	DOCUMENT 6000000905				
DOUBLE EAGLE OFFICE	BUILDING LIN	MITED PARTNERS	HIP			
Mailing Address	Principal Off	ice Address	e. Icus	3. Date Formed or Registered	5a. Capital Contributions as Shown on record	
107 PLANTERS ROW W PONTE VEDRA BEACH FL 32082		Principal Office Address 107 PLANTERS ROW W PONTE VEDRA BEACH FL 32082		05/15/1996 3a. Date of Last Report	\$600,000-00	
2. Mailing Address	T22		<i>O</i> . <i>\</i>	11/10/1997 4. State or Country of Formation	5b. Aniount of Capital Contributions in Et OfRDA to date	
		ipal Office Address		FL		
Suite, Apt. #, etc. City & State	Suite, Apt #			6. FEI Number 59-3391380	Applied For Not Applicable	
Zip Country	Zip	Country		7. Certificate of Status Desired 8. Make the * physible to Dept of	\$8.75 Additional File Respond State (See reverse side for fee information	
9. Name and Address of	Current Registered Agen	Name		10. If changed, nex Registeres	d Agent'Office	
GOLDBERG, MARVIN H		Street Address (P.O. Box Number Is Not Acceptates)				
107 PLANTERS ROW W PONTE VEDRA BEACH FL 32082		Suite, A	Apt#,eli			
	City		FL Zip Code			
 Pursuant to the provisions of sections 620 for the purpose of changing its registered of agent. I am familiar with, and accept the of 	office or registered agent, or	both, in the State of Florida, Such cl				
SIGNATURE (Registered Agent Accepting Appointm	HAT IS A COR	PORATION, LIMITE				
11. Name(s) of General Partner(s)	r	Address of Each General Partner o NOT Use Post Office Box Numbers	1	City State & Zip Code	11c. Registration/ Document Number	
MARSGOLD, INC.	107 PI	107 PLANTERS ROW W		nte vedra beach fl	P9400069439	
				4 4 (CHCHCHC 12) 002/00 84445	7674114 78901022008 76,25 ****526,25	
Note: General partners MAY					• • •	
 I do hereby certify that the information supple Corporations from any liability of non-complia this annual report is true and accurate and the 	ance with Section 119,07(3)	(k) in the event that the information s	upplied is deen	ed exempt from public access. I forther	certify that the information indicated or	

empowered to execute this report as required by chapter 620, Florida Statutes

SIGNATURE Marie of General Partner Signing Form MARUIN H. GOLDSERG Daytne Telephone turns of 907 255-9979