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

LIMITED PARTNERSHIP **ANNUAL REPORT** 1000



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

1990	DIVISION OF C	CORPORATIONS				
1. Name of Limited Partnership		1a. DOCUMENT # A9600001559		98 JAN 22 AM 9: 38		
BARCLAY GROUP NO. 1, LTD.						
			91/27		_	
Malling Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.		
C/O BARCLAY GROUP	C/O BARCLAY GROUP		08/21/1996	\$ E00.000.00		
1123 OVERCASH DRIVE DUNEDIN FL 34698	1123 OVERCASH DRIVE DUNEDIN FL 34698		38. Date of Last Report	\$500,000.00		
DOILDIN LE 09000	POLITOR LE 04000		02/07/1997	5b. Amount of Capital Contributions in FLORIDA		
2. Mailing Address	2a. Principal Office Address	2a. Principal Office Address		to date		
	College And Head		FL			
Suite, Apt. #, etc. City & State	Suite, Apt. #, etc. City & State		6. FEI Number 59 - 3390 APPLIED FOR	Applied For Not Applicable		
			7. Certificate of Status Desired	\$8.75 Additional Fee Required		
Zip Country	Zip	Country	8. Make check payable to: Dept. of	State (See reverse side for fee information)	
9. Name and Address of C	urrent Registered Agent		10. If changed, new Registere	d Agent/Office	1	
HUDOBA, STEPHEN M		Name			1	
101 EAST KENNEDY BLVD., SUITE 37	00	Street Address	s (P.O. Box Number Is Not Acceptable)		1	
TAMPA FL 33602		Suite, Apt. ∦, etc.			1	
		City		FL Zip Code	1	
108. Pursuant to the provisions of sections 620.10 for the purpose of changing its registered off agent. I am familiar with, and accept the obli	ice or registered agent, or both, in the State of F gations of section 620, 192, Florida Statutes.			aby accept the appointment of registered		
A GENERAL PARTNER TH		LIMITED F	PARTNERSHIP OR OTHE		1	
11. Name(s) of General Partner(s)	11a. Address of Each Gene (Do NOT Use Post Office	eral Partner Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number		
OREGON PROPERTIES, INC.	1123 OVERCASH DRIVE		DUNEDIN FL 34698	J14545	(26/97)	
			6000024 -01/28/ ****54	4 15156 9 /9301098017 11.25 *****541.25	CRZEOC	
Note: General partners MAY N	NOT be changed on this for	m· an amer	ndment must be filled to che	ange a general partner	7	
12. I do hereby certify that the information supplied		not qualify for the ex	xemption stated in Section 119.07(3)(k), Florida	Statutes. I release the Division of	- ∍	
SIGNATURE	2) Complete Occupanting Stations		DATE	1/21/98		

Typed or Printed Marne of General Partner Signan Form Discid S. Coia Daytime Telephone Number 5/3/733-7585