## 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

a. DOCUMENT # **A96000001737** 

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VILLAGE CATTLE VENTUR	RE #4, LTD.	<b>1</b>					
					L 415		
Mailing Address	Principa' Office Address	3. Date F	ormed or Registered	5a. Capital Contributions as Shown on record.			
P.O. BOX 1299	1100 MAIN STREET	09/1	9/1996	\$110,000.00			
LADY LAKE FL 32158	SUITE 211 LADY LAKE FL 32159	3a. Date	of Last Report				
	CADI CARE PE 32138	01/0	2/1997	5b. Amount of Capital Contributions in Ft Off	iif)A		
2. Mailing Address	2a. Principal Office Address	4. State o	or Country of Formation	in the control of the			
	<u></u>	FL					
Suite, Apt. #, etc.  City & State	Suite, Apt. #, etc.		6. FEI Number 59-3434658 APPLIED FOR Not Applied For		Of notice		
City & State	City & State	7. Certific	sate of Status Desired	\$8.75 Additional Foo Required			
Zip Country	Zip Cou	ntry		·			
		O. Make o	check payable to: Dept. of	State (See reverse side for fee	Information		
9. Name and Address of	Current Registered Agent	10. If changed, now Registered Agent/Office					
BURNSED, R. DEWEY ESQ.		ime .	200002	405592-	3		
1100 MAIN STREET	St	Street Address (P.O. Box Number Is Not Acceptable 17/20/38—01155—011					
LADY LAKE FL 32159	Su						
	Cit	y		FL Zp Code			
for the purpose of changing its registered o	051 and 620-192, Florida Statutes, the above-named limit flice or registered agent or both, in the State of Florida S ligations of section 620-192, Florida Statutes.	ied partnership organizod or regis luch change was authorized by its	stered under the laws of the speneral partner(s). I here	eby accept the appointment of	statement registered		
A GENERAL PARTNER TH	HAT IS A CORPORATION, LIMIUST BE REGISTERED AND A	ITED PARTNERSI CTIVE WITH THIS	HIP OR OTHE S OFFICE.	R BUSINESS EN	ITITY		
11. Name(s) of General Partner(s)	Address of Each General Partr (Do NOT Use Post Office Box Nur		tate & Zip Code	11c. Registratio			
MCDOWELL, PAUL	1100 MAIN STREET		LADY LAKE FL 32159				
	NOT be changed on this form; a						

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1. 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 logal effects as if made under eath. I further certify that I am a General Partner of the limited partnership, receiver or trustness amount of the limited partnership, receiver or trustness amount of the limited partnership. Provided Statutes.

SIGNATURE

and most onesell
nor Signing Form PAUL Me Dowell

DATE 12.29.94

Daytine Telephone Number (351) 759 1270