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

A96000001908

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

97 DEC 30 PM 3: 18



CP-KENSINGTON, LTD			I FEBRUIT (BIR 10120 BITTH BBIRF)	18111 VUNSI UBILI U	FIET
Malling Address Principal Office Address 3030 HARTLEY ROAD, SUITE 100 3030 HARTLEY ROAD, SUITE 100 JACKSONVILLE FL 32257 JACKSONVILLE FL 32257		00	3. Date Formed or Registered 10/11/1996 3a. Date of Last Report	5a. Cepital Contributions as Shown on record. \$7,000.00 5b. Amount of Capital Contributions in FLORIDA to date: \$00.00	
2. Mailing Address	2a. Principal Office Address	28. Principal Office Address			
Suite, Apt. #, etc.	Suite, Apt. #, etc.			Applied For Not Applicable	
lly & State City & State			7. Certificate of Status Desired	SB.75 Additional	
Zip Country	Zip	Country	8. Make check payable to: Dent. o	Fee Required 1 State (See reverse side for fee information	
	ss of Current Registered Agent	10. If changed, new Registered Agent/Office Nanic			
VCP-KENSINGTON, INC. 3030 HARTLEY ROAD, SUITE 100 JACKSONVILLE FL 32257		Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc.			
		City FL Zip Code			Zip Code
for the purpose of changing its registe agent. I am familiar with, and accept the SIGNATURE (Registered Agent Accepting App		Florida, Such change	e was authorized by its general partner(s). The	reby accept the	appointment of registered
A GENERAL PARTNER	THAT IS A CORPORATION MUST BE REGISTERED A	, LIMITED F ND ACTIVE	PARTNERSHIP OR OTHE WITH THIS OFFICE.	R BUSII	NESS ENTITY
11. Name(s) of General Partner(s)	11a. Address of Each Ger (Do NOT Use Post Office	neral Partner Box Numbers)	11b. City, State & Zip Code	11c.	Registration/ Document Number
VCP-KENSINGTON, INC.	3030 HARTLEY ROAD,	SU	JACKSONVILLE FL 32257	P96000084297	
• • • • • • • • • • • • • • • • • • •			4000024008142 -01/15/9801003013 ****156.25 ****156.25		
Note: General partners M.	AY NOT be changed on this fo	rm; an amer	ndment must be filed to ch	ange a ge	eneral partner.

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 inclicated 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.

Typed or Printed Name of General Partner Signing Form.

Mark T. Farrell