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

LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # **A9600001940**

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 DCT -2 PH 12: 14

Mailing Address 5401 SOUTH KIRKMAN ROAD. SUITE 515 ORLANDO FL 32819	Principal Office Address 5401 SOUTH KIRKMAN ROAD. SUITE 515 ORLANDO FL 32819	3. Date Formed or Registered 10/18/1996 3a. Date of Last Report 12/18/1997	52. Capital Contributions as Shown on record. \$7,500.00 5b. Amount of Capital Contributions in FLORIDA to date:
2. Malling Address	2a. Principal Office Address	4. State or Country of Formation	# 7,500.00
Suite, Apt. #, etc. City & State	Suite, Apt. #, etc. City & State	6. FEI Number 59-3405859	Applied For Not Applicable
Zip Country	Zip Country	7. Certificate of Status Desired 8. Make check payable to: Dept. o	\$8.75 Additional Fee Required 1 State (See reverse side for fee Information)
	Name Street Ad Suite, Ap City and 620, 192, Florida Statutes, the above-named limited part or registered agent, or both, in the State of Florida. Such che	thership organized or registered under the laws of the	FL Zip Code
	TIO A CORDODATION A MAITE	DATE	
SIGNATURE (Registered Agent Accepting Appointment)_ A GENERAL PARTNER THA MU	T IS A CORPORATION, LIMITE ST BE REGISTERED AND ACT		ER BUSINESS ENTITY
	T IS A CORPORATION, LIMITE ST BE REGISTERED AND ACT 11a. (Do NOT Use Poel Office Box Numbers)		

12. I do hereby certify that the Information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of

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

SIGNATURE

Typed or Printed Name of General Partner Signing Form

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 legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee