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 # A9600002028

SECRETARY OF STATE DIVISION OF CORPORATIONS

98 DEC -9 PM 2: 28

BOARDWALK OF ALAFAYA TRAIL, LTD.							
Mailing Address	Principal Office Address			3. Date Formed or Registered	5a. Capital Contributions as Shown on record.		
PO BOX 7131 GAINESVILLE FL 32805	3600 NW 43RD STREET, STE. E-2 GAINESVILLE FL 32606			10/31/1996 3a. Date of Last Report	\$1,000,000.00		
			ļ	01/14/1998	5b. Amor	int of Capital ibutions in FLORIDA	
2. Mailing Address	2a. Principal Office Address	• •		4. State or Country of Formation	to dat	e:	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			FL 6. FEI Number		Applied For	
City & State	City & State			59-3406932	Not Applicable		
Zlp Country	Zip Country			7. Certificate of Status Desired	×	\$8.75 Additional Fee Required	
2.5				8. Make check payable to: Dept. of S	tate (See reve	erse side for fee information)	
9. Name and Address of Current Registered Agent			10. If changed, new Registered Agent/Office				
Nam							
KISSEL, WALDEMAR F JR 2630 N.W. 41ST STREET, SUITE C-2			dress (P.O. Box Number Is Not Acceptable)				
GAINESVILLE FL 32605	Suite, Apt. #		#, etc.				
City				FL Zip Code			
10a. Pursuant to the provisions of sections 620.1051 and 62 for the purpose of changing its registered office or regis agent. I am familiar with, and accept the obligations of signature.	tered agent, or both, in the State of Florid						
A GENERAL PARTNER THAT IS	A CORPORATION, L	IMITED	PART		R BUSI	NESS ENTITY	
MUST	<u>BE REGISTERED ANI</u>	O ACTIV	/E WIT	H THIS OFFICE.			
11. Name(s) of General Partner(s)	11a. Address of Each General (Do NOT Use Post Office Box	Partner (Numbers)	11b.	City, State & Zip Code	11c.	Registration/ Document Number	
e Qadwalk at Alafaya Trail,	4300 NW 43RD STREET		GAINESVILLE FL 32606		P96000089557		
•				200002 -12/11/ ****\$3	7107 79801 85.00	7026- 103004 ****535.00 -	
	1				1	1	

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. 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

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