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 # **A9700000117**

98 JAN 22 AM 9: 39



| BARCLAY GROUP NO. 2, L | .TD. | | | | |
|---|---|---|--|--|--|
| | | | 001/27 | | |
| Mailing Address | Principal Office Address | | 3. Date Formed or Registered | 5a. Capital Contributions as Shown on record. | |
| C/O BARCLAY GROUP 1123 OVERCASH DRIVE DUNEDIN FL 34698 | C/O BARCLAY GROUP 1123 OVERCASH DRIVE DUNEDIN FL 34898 | | 01/14/1997 3a. Date of Last Report | \$350,000.00 | |
| DUNCOM PL 94000 | DOMEDIM LT 34030 | | | 5b. Amount of Capital Contributions in FLORIDA | |
| 2. Mailing Address | 28. Principal Office Address | | 4. State or Country of Formation | to date: | |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | | 6. FEI Number | Applied For | |
| City & State | City & State | City & State | | 7. Certificate of Status Desired \$8.75 Additional | |
| Zip Country | Zip Country | | Fee Required 8. Make check payable to: Dept. of State (See reverse elde for fee information | | |
| O Name and Address of C | Surrant Davistaved Appat | | 10. If changed, new Registere | d Aggra/Office | |
| 9. Name and Address of Current Registered Agent HUDOBA, STEPHEN M 101 EAST KENNEDY BLVD., SUITE 3700 TAMPA FL 33602 | | Name | | | |
| | | Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. | | | |
| IAMPA PE 93002 | | | | | |
| | | City Zip Code | | | |
| agent. I am familiar with, and accept the obling Appointme A GENERAL PARTNER TH | flice or registered agent, or both, in the State of Flor igations of section 620, 192, Florida Statutes. | rida. Such change was a | nuthorized by its general partner(s). I her DATE TNERSHIP OR OTHE | by accept the appointment of registered | |
| | UST BE REGISTERED AN Address of Each Genera | I Dortone | | Registration/ | |
| 11. Name(s) of General Partner(s) OREGON PROPERTIES, INC. | 11a. (Do NOT Use Post Office Bo | x Numbers) | City, State & Zip Code | J14545 | |
| | | | 8000024 -01/28/ ****54 | 4151583 /3301098018 1.25 *****\$41.25 | |
| * | | | | | |
| Note: General partners MAY I | | | | | |
| 12. I be hereby certify that the information supplied Corporations from any liability of non-complian this annual report is true and accurate and liab empowered to execute this report as required. | ce with Section 119 07(3)(K) In the event that the inf May signature shall have the same ogal effects as | formation supplied is de | emed exempt from public access. I furth | er certify that the information indicated on | |

SIGNATURE

David S. Coin