TO REVOCATION AND	\$500 PENALTY FEE	LL BE 91	DBJEGI			
LIMITED PARTNERSHIP ANNUAL REPORT 1998	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		DIVISION OF CORPORATIONS			
1. Name of Limited Partnership	1a. DOCUMENT # A97000000201			98 JAN -2 PM 2: 15		
GWIN-HART, LTD.						
Mailing Address 1209 AIRPORT ROAD, SUITE 4 DESTIN FL 32541	Principal Office Address 1209 AIRPORT ROAD, SUITE 4 DESTIN FL 32541		3. Date Formed or Registered 01/23/1997 3a. Date of Last Report	5a. Capital Contributions as Shown on record.		
2. Malling Address 36468 Emerald Coast PKWY				4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date	
Suite, Apt. #, etc. Suite 120\ City & State	Suite, Apt. #, etc. Swite 1201 City & State			6. FEI Number	Applied For Not Applicable	
Destin, FL Zip Country 32541 US	Destin, FL Zip 32541	Country		7. Certificate of Status Desired 8. Make check payable to: Dept. of	\$8.75 Additional Fee Required State (See reverse side for fee information)	
9. Name and Address of Current Re	gistered Agent			10. If changed, new Registered	1 Agent/Office	
GWIN, CURTIS H 1209 AIRPORT ROAD, SUITE 4 DESTIN FL 32541		Street Address (P.O. Box Number Is Not Acceptable) 36348 Emeral & Coast Pkwy Suite, Apt. #. etc. City Destrice Zip Code 3 2 5 4 1				
10a. Pursuant to the provisions of sections 620,1051 and 62 for the purpose of changing its registered office or registered agent, I am familiar with, and accept the obligations of SIGNATURE (Registered Agent Accepting Appointment)	stered agent, or both, in the State of Flori	l limited partr	ership organ	horized by its general partner(s). I here 30020-01/21	e State of Florida, submits this statement	
A GENERAL PARTNER THAT IS MUST E	A CORPORATION, L BE REGISTERED AND	IMITED ACTIV	PART	NERSHIP OR OTHE		
11. Name(s) of General Partner(s)	11a. Address of Each General	-	11b.	City, State & Zip Code	11c. Registration/ Document Number	
THE GWIN COMPANY OF DESTIN, 1200 AIRPORT ROAD, SU 36348 Emerals Co Thuy # 1201		DES:		TIN FL 32541	P96000098629	
			5 5			

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 filting 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 legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee en powered to execute this report as required by chapter 620, Floring Statutes.

Commercial Company and Commercial

Typed or Printed Name of General Partner Signing Form

12-30-97

450-837-0392

CR2E003 (6/97)