

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 M. McSham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 DEC 30 AM 11:45

1. Name of Limited Partnership		1a. DOCUMENT # A97000000245	
BAYBRIDGE APARTMENTS, LTD.			
Mailing Address c/o Echelon General Partner Affordable Housing, Inc. One Progress Plaza Suite 1500 St. Petersburg, FL 33701		Principal Office Address c/o Echelon General Partner Affordable Housing, Inc. One Progress Plaza Suite 1500 St. Petersburg, FL 33701	
2. Mailing Address		2a. Principal Office Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip		Country	
		3. Date Formed or Registered 01/28/97	
		3a. Date of Last Report 12/16/97	
		4. State or Country of Formation Florida	
		6. FEI Number 59-3420652	
		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
		7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
		8. Make check payable to, Dept. of State (See reverse side for fee information)	

200002734882--8

01/08/99 01080-016
***\$26.25 Capital Contributions
***\$26.25 Down on Fee

\$684.000

5b. Amount of Capital
Contributions in FLORIDA
to date:

\$684.000

9. Name and Address of Current Registered Agent Susan G. Johnson c/o Echelon International Corporation One Progress Plaza, Suite 1500 St. Petersburg, FL 33701		10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code	
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10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE 12/28/98

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s) Echelon General Partner Affordable Housing, Inc.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) One Progress Plaza Suite 1500	11b. City, State & Zip Code St. Petersburg, FL 33701	11c. Registration/ Document Number P98000014798 P97000006785
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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 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 empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

DATE 12/28/98

Typed or Printed Name of General Partner Signing Form Susan G. Johnson

Daytime Telephone Number 727-803-8200

CR2E003 (9/98)