FILĘ 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

DOCUMENT #

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 DEC 29 PM 2:51

Name of Limited Partnership	Ä97000000389				
WILLOW RUN HOUSING I, LTD.					
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.	
390 N. ORANGE AVENUE, SUITE 1100	930 NORTH ORLANDO AVE. SUITE 320		02/13/1997	\$50.00	
ORLANDO FL 32801	WINTER PARK FL 32789		3a. Date of Last Report	950.00	
	2a. Principal Office Address 98 San Jacinto Blvd.		01/09/1998	5b. Amount of Capital Contributions in FLORIDA to date:	
2. Mailing Address			4. State or Country of Formation		
			FL		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For	
Clty & State	City & State		59-3426384		
Zip Country	AUSTIN TK Zip Country 1870) USA		7. Certificate of Status Desired	\$8.75 Additional Fee Required	
-			8. Make check payable to: Dept. of State (See reverse side for fee information)		
9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office					
B&C CORPORATE SERVICES OF CENTRAL FL, INC. 390 NORTH ORANGE AVENUE, SUITE 1100		Name			
		Street Address (P.O. Box Number Is Not Acceptable)			
ORLANDO FL 32801		Suite, Apt. #, etc.			
	City		<u></u>	Zip Code	
100 Surrount to the provisions of sections 620 (051 and	620 102 Floride Statutes the share around limited			FL	
10a. Pursuant to the provisions of sections 620.1051 and for the purpose of changing its registered office or re agent. I am familiar with, and accept the obligations	gistered agent, or both, in the State of Florida. Such	change was auth	nized or registered under the laws of the norized by its general partner(s). I hereby	accept the appointment of registered	
SIGNATURE (Registered Agent Accepting Appointment)DATE					
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)	11a. Address of Each General Partner (Do NOT Use Post Office Box Number	_{s)} 11b.	City, State & Zip Code	11c. Registration/ Document Number	
WILLOW RUN HOUING II, INC.	95 0 NORTH ORLANDO AVE	IIW	TER-PARK FL 32789.	P97000014182	
	98 San Jacinto				
	BIVd,	A	ustin, Texas		
	Suite 710		78701		

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 apport as required by chapter 620, Florida Statutes. SIGNATURE ≤

Typed or Printed Name of General Partner Signing Form