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

DOCUMENT# A97000000542

FILED

98 NOV -9 PM 12: 47

SECRETARY OF STATE TALLAMASSEE, FLORIDA

OCOEE LAND DEVELOPMENT, LTD.					
Mailing Address 860 STATE ROAD 434 NORTH. SUITE 7 ALTAMONTE SPRINGS FL 32714	Principal Office Address 860 STATE ROAD 434 NORTH, SUITE 7 ALTAMONTE SPRINGS FL 32714		3. Date Formed or Registered 03/03/1997 3a. Date of Last Report 10/31/1997	5a. Capital Contributions as Shown on record. \$982,395.00 5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	to date:	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 59-3426090	Applied For Not Applicable	
City & State Zip Country	City & State Zip Country		7. Certificate of Status Desired	\$8.75 Additional Fee Required	
			8. Make check payable to: Dept. of S	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		
GOLD, H. SCOTT 860 STATE ROAD 434 NORTH, SUITE 7 ALTAMONTE SPRINGS FL 32714		Name Street Address (P.O. Box Number Is Not Acceptable)			
		Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc.			
		City FL Zip Code			
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 (Do NOT Use Post Office Box	Partner 44	······································	11c. Registration/	
OCOEE LAND DEVELOPMENT, INC. 860 STATE ROAD 434 NO			ALTAMONTE SPRINGS FL	P96000090047 88	
			9000026 -11/10/9 ****\$2	801092023	
			A	L NOV - 9 1998	
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 unished 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 19.07(b)(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 sharingly the same legal effects as it 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					