FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999

THE VILLAGE GROUP, LTD.



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secktary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT# A97000000726

99 JAN 27 MIII: 23

Mailing Address 9724 Bay Meadowlf Ld 9778 BAYMEABOWS FLOAD, SUITE 113 JACKSONVILLE FL 32256	Principal Office Address F129 Kayme activity Rd 9770 BAYMEADOWS ROAD, SUITE 119 JACKSONVILLE FL 32256		
2. Mailing Address	2a. Principal Office Address		
Suite, Apt #, etc.	Suite, Apt. #, etc.		
City & State	City & State		
Zip Country	Žip Country		

3. Date Permed or Registers 1	5a. Capital Contributions as Shown on record
03/27/1997 3a , Date of Last Report	\$530,034.00
01/02/1998 4. State or Country of Formation	5b. Aniount of Capital Contributions in FLOR-DA to date
FL 6. FE: Number 59-343 AP-PLIED FOR	Applied For U Not Applicable
7. Certificate of Status Desired	\$8.75 Arbitraria'

-	,			
9. Name and Address of Current Registered Agent	10. If changed no	10. If changed new Registered Agent/Office		
	Name	• •		
ALLEN, GLENN K 353 EAST FORSYTH STREET	Street Address (P.O. Box Number Is Not Accepta	tie)		
JACKSONVILLE FL 32202	Suite, Apt. #, etc			
SHORSOWILLE TE SZZUZ				
	City	FL Zip Code		
10a. Pursuant to the provisions of sections 620 1051 and 620 192, Florida Statutes, the at- for the purpose of changing its registered office or registered agent, or both, in the St.				

agent I am familiar with, and accept the obligations of section 620 192, Florida Statutes

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 (De NOT Use Post Office Box Numbers)

City, State & Zip Code

Registration/ Document Number 11c.

THE VILLAGE GROUP, INC.

~9770 BAYMEADOWS ROAD,

11b.

P96000092980

9124

JACKSONVILLE FL 32256

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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. Vido 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)(*), Florida Statutes Trelease the Division of corporations from any liability of non-compliance with Section 119 07(3)(k) in the event that the information supplied is decreed exempt from public a cross. I further certify that the information indicated on this annual report is true and accurate and that my signaline shall have the same legal effects as if made under oath. I further certify that I am a General Partner of true limited partnership, receiver or trustee e powered to execute this report as required by chapter 620. Florida Statutes

12/26/98

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number