## FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

1. Name of Limited Partnership

**DOCUMENT #** A97000000789

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SECRETARY OF STATE TALLAHASSEE, FLORIDA



LAKE CLUB APARTMENTS, LTD.					
Mailing Address	Principal Office Address		3. Date Formed or Registered	<b>5a.</b> Capital Contributions as Shown on record.	
399 WEST PALMETTO PARK ROAD, SUITE 104	399 WEST PALMETTO PARK ROAD. SUITE 104 BOCA RATON FL 33432		04/08/1997		
BOCA RATON FL 39432			3a. Date of Last Report	\$7,500.00	
				5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address	2a. Principal Office Address	2a. Principal Office Address		\$715,000.00	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		Applied For	
City & State	City & State	City & State		Not Applicable	
Zip Country	Zip Country		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 Curre	nt Registered Agent	T	10. If changed, new Registere	d Agent/Office	
SUNMARK PROPERTIES, INC. 399 WEST PALMETTO PARK ROAD, SUITE 104 BOCA RATON FL 33432		Name			
		Street Address (P.O. Box Number is Not Acceptable)			
		Suite, Apl. #, etc.			
		City		Zip Code	
SIGNATURE (Registered Agent Accepting Appointment)  A GENERAL PARTNER THAT	IS A CORPORATION, I	IMITED PA	RTNERSHIP OR OTHE		
11. Name(s) of General Partner(s)	Address of Each Course	- D		11c. Registration/	
<u> </u>	11a. (Do NOT Use Post Office Bo	ox Numbers)	Di diy, dala a zip abau	Decament Hamber	
SUNMARK PROPERTIES, INC.	399 WEST PALMETTO PA	AR .	BOCA RATON FL 33432	P97000031676	
•			900002 -01/21 *****	/8801123003	
<del></del>		3.75	dec		
Note: General partners MAY NO					
12. I do hereby certify that the information supplied with Corporations from any liability of non-compliance wit this annual report is true and accurate and that my s empowered to execute this report as required by ch	h Section 119.07(3)(k) in the event that the in	formation supplied is	deemed exempt from public access. I further l further certify that I am a General Partner of	er certify that the information indicated on the limited partnership, receiver or trustee	
SIGNATURE	General Partner	ر) ز	DATE	2/8/97	
Typed or Printed Name of General Partner Signing Form	Jan Krinaku Danddant		Daytime Telephone Number	61 392-9356	