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

empowered to execute this reg

SIGNATURE

1a. DOCUMENT # **A9700000997**

FILED
DIVISION OF CORPORATIONS

98 DEC 21 PM12: 33

	A9100000991		_}		
GULF BAY HOSPITALITY, LTD.			2012/30		
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.	
801 LAUREL OAK DR., SUITE 710 NAPLES FL 34108	4001 Tamiami Tr. N., Ste. 350 Naples Fl 34103		04/28/1997 3a. Date of Last Report	\$50,000.00	
			12/29/1997	5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	to date: \$50,000.00	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 65-0757657	Applied For Not Applicable	
City & State	City & State		7. Certificate of Status Desired	\$8.75 Additional	
Zip Country	Zip Country			Fee Required tate (See reverse side for fee information)	
			40 /		
9. Name and Address of Current Registered Agent Name			10. If changed, new Registered Agent/Office		
WOODWARD, MARK J 801 LAUREL OAK DR., STE. 710		Street Address (P.O. Box Number Is Not Acceptable)			
NAPLES FL 34108			¢, etc.		
City		City	FL Zip Code		
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 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)					
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		City, State & Zip Code	11c. Registration Document Number	
GULF BAY HOSPITALITY, INC.	4001 TAMIAMI TRAIL NO		APLES FL 34103	P97000031083	
			358175,UP		
			-01/08/	7347362 1901067010 1.50 ****447.50	
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)(x), Florida Statutes. I release the Division of

Corporations from any liability of non-compliance with Section 119.07(3)(x) 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

President

(and not individually)

DATE 12/16/98

Daytime Telephone Number