FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP

WILL BE SUBJECT TO REVOCA	ATION AND \$500 PENALT	Y FEE						
LIMITED PARTNERSHIP ANNUAL REPORT 1999	FLORIDA DEPART Sandra B. I Secretary DIVISION OF CO	Mortham of State		FILED 98 DEC 30 PM 12: 56				
1. Name of Limited Partnership	1a. DOCUME A97000001	ENT # 005		SECRETARY OF STATE TALLAHASSEE. FLORIDA				
CRYSTAL COURT PROPERTIES,	ļ							
Mailing Address	Principal Office Address	-		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.			
7826 COOPER RD	7826 COOPER RD CINCINNATI OH 45242			05/06/1997	\$99.00			
CINCINNATI OH 45242		3a. Date of Last Report						
			-	12/31/1997 4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:			
2. Mailing Address	lailing Address 2a. Principal Office Address				io oaie.			
Suite, Apt. #, etc.	Suite, Apt. #, etc.			FL.				
				31-1575487	Applied For Not Applicable			
City & State	City & State		}	7. Certificate of Status Desired	\$8.75 Additional			
Zip Country	Zip	Country		8. Make check payable to: Dept. of S	Fee Required late (See reverse side for fee information)			
	# 141.25							
9 Name and Address of Current Reg	Na	10. If changed, new Registered Agent/Office						
-GK-PA-CORP.		McGra	ath, Gr	egory	- Like			
-1428 BRIGKELL AVENUE, 6TH FLOOR	4561 0	Gulf of	Mexico Drive	100				
- MIAMI FL 33131 -	Su #101 Longbe	oat Ke	y, FL 34228	==				
		,, - C 0 <u></u> 2	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 office or 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 MUST E	A CORPORATION, L BE REGISTERED ANI				R BUSINESS ENTITY			
11, Name(s) of General Partner(s)	11a. Address of Each General (Do NOT Use Post Office Box	Partner (Numbers) 1	l1b.	City, State & Zip Code	11c. Registration/ Document Number			
BARON CAPITAL LIX, INC.	-7795 COOPER ROAD 7826 Cooper	_]	CINCINNATI OH 45242		P97000040147			
				5000021 -01/21, ****14	7499057 /8901076011 11.25 ****141.25			

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 examption stated in Section 119.07(3)(k), Flortda 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 exampt 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 report as required by chapter 620, Florida Statutes.

SIGNATURE

SIGNATURE

DATE

DATE

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Typed or Printed Name of General Partner Signing Form 🕽		. (11)	4 ~!	- 1	144.1	CAY WYW		Davtime Telephone N	umber 🛥		10 (ا ۲۰۰۰	
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