

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 HOSTETTER FAMILY PARTNERSHIP, LTD.		
1a. DOCUMENT # A97000001044		

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 DEC 17 AM 9:32 *HC 1219*



Mailing Address CHARLES T. HOSTETTER 1747 DEL WEBB BOULEVARD SUN CITY CENTER FL 33573	Principal Office Address 1747 DEL WEBB BOULEVARD SUN CITY CENTER FL 33573	3. Date Formed or Registered 05/09/1997	5a. Capital Contributions as Shown on record \$943,743.28
2. Mailing Address c/o CHARLES T. HOSTETTER Suite, Apt. #, etc. 1747 WEST DEL WEBB BLVD City & State SUN CITY CENTER, FL Zip 33573	2a. Principal Office Address Suite, Apt. #, etc. 1747 WEST DEL WEBB BLVD City & State SUN CITY CENTER, FL Zip 33573	3a. Date of Last Report N/A - FORMED IN '97	5b. Amount of Capital Contributions in FLORIDA to date: \$ 828,294.39
4. State or Country of Formation FL		6. FEI Number 59-7094063	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 Current Registered Agent HOSTETTER, CHARLES T. 1747 DEL WEBB BOULEVARD SUN CITY CENTER FL 33573	10. If changed, new registered agent HOSTETTER, CHARLES T. 1747 WEST DEL WEBB BLVD SUN CITY CENTER FL 33573
--	---

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)

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) CHARLES HOSTETTER, CHARLES T TRUSTEE HOSTETTER, ROBERT R HOSTETTER, ROBERT R	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 1747 WEST DEL WEBB BLVD 1747 DEL WEBB BLVD 300 BERNICE STREET 5267 SW COLLEGE	11b. City, State & Zip Code SUN CITY CENTER FL 33573 ROME CITY IN 46784 SEATTLE WA 98116	11c. Registration/ Document Number
--	--	--	---------------------------------------

*NOTE: GENERAL PARTNERS ARE NOT BEING CHANGED —
THE ENTRIES ABOVE ARE TO CORRECT SPELLING ONLY*

CR2E003 (6/97)

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)(k), Florida 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 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 empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE *Charles T. Hostetter*

DATE