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

LIMITED PARTNERSHIP ANNUAL REPORT





FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT# A97000001251

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 DEC -3 AM 10: 06

THE NICHOLS GROUP, LTD.					
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.	
P. O. BOX 3319 SARASOTA FL 34230	7340 REGINA ROYALE SARASOTA FL 34238		06/05/1997 3a. Date of Last Report	\$990.00	
2. Mailing Address	2a. Principal Office Address		12/04/1997 4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:	
Suite, Apt. #, etc. City & State	Suite, Apt. #, etc. City & State		6. FEI Number 65-0757704	Applied For Not Applicable	
Zip Country	Zip Country		7. Certificate of Status Desired	\$8.75 Additional Fee Required	
			8, Make check payable to: Dept.	8, Make check payable to: Dept. of State (See reverse side for fee information)	
9. Name and Address of Current Registered Agent			10. If changed, new Registered Agent/Office		
FAMIGLIO, GEORGE V 1634 MÄIN STREET SARASOTA FL 34230		Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc.			
ONINGOTA 1 E 04200		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 office or registered agent. I 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 570.192, Florida Statutes.					
SIGNATURE (Registered Agent Accepting Appointment)	gue jus	12	DA DA		
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 (Do NOT Use Post Office Bo	Partner .	11b. City, State & Zip Code	11c. Registration/ Document Number	
NICHOLS MANAGEMENT GROUP, LC	7340 REGINA ROYALE		SARASOTA FL 34238	L97000000517	
			-12/1	2706558—-S 08/98—01073—012 1204-25 ****204-25	

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 exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of accompliance 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 the analysis of the same legal effects as if made under onth. I further certify that I am a General Partner of the limited partnership, receiver or trustee Corporations from any llability of non-this annual report is true any accurat empowered to execute this report as regter 620, Florida Statutes.

SIGNATURE _

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number