

**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

**FILED**

98 JAN -2 PM 1:11

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*J 1/14*

1. Name of Limited Partnership

1a. DOCUMENT #

A97000001438

Park Place at Metrowest Phases Four & Five, Ltd.

Mailing Address

Principal Office Address

3. Date Formed or Registered

06/26/97

5a. Capital Contributions as

\$15,000.00

3a. Date of Last Report

5b. Amount of Capital Contributions in FLORIDA to date:

\$7,500.00

4. State or Country of Formation

Florida

2. Mailing Address

1803 Park Center Drive

Suite, Apt. #, etc.

Suite 220

City & State

Orlando, FL

Zip

32835

Country

US

2a. Principal Office Address

1803 Park Center Drive

Suite, Apt. #, etc.

Suite 220

City & State

Orlando, FL

Zip

32835

Country

US

6. FEI Number

59-3462940

Applied For  
 Not Applicable

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

Randolph J. Rush  
250 Park Avenue South, 5th Floor  
Winter Park, FL 32789

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc.

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, 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)

Park Development Corporation

11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)

1803 Park Center Drive  
Suite 220

11b. City, State & Zip Code

Orlando, FL 32835

11c. Registration/Document Number

6  
F9000001599  
A

700002407157--6  
-01/21/98--01095--015  
\*\*\*\*156.25 \*\*\*\*156.25

**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 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

*David Townsend, President*

DATE

12/30/97

Typed or Printed Name of General Partner Signing Form

David J. Townsend, President of Park Development Corporation

Daytime Telephone Number

407-294-6400

CR2E003 (6/97)