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

LIMITED PARTNERSHIP **ANNUAL REPORT** 1999

Typed or Printed Name of General Partner Signing Form



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

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Daytime Telephone Number

Name of Limited Partnership	A97000001563							
ARDEN ESTATES-DAVENPORT LIMITED PARTNERSHIP								
Malling Address	Principal Office Address	*		3. Date Formed or Registered	5a. Capit	al Contributions as		
MARK PORATH 18830 VENTURA BLVD., #352 ENCRYO CA 81436	% James Griffin 1401 E. Broward Blvd #302 Ft. Lauderdale Fl. 33301			07/16/1997 3a. Date of Lest Report 12/31/1997	\$100.00 5b. Amount of Capital Contributions in FLORIDA to date			
2. Mailing Address c/o MARK PORATH	2a. Principal Office Address			4. State or Country of Formation	797,995.65			
16133 VENTURA BLVD, STE 1400 ENCINO, CA 91436 USA	uite, Apt. #, etc.			6, FEI Number 95-4660650	Applied For Not Applicable			
	ip Country		[\$8.75 Additional Fee Required of State (See reverse side for fee information)			
9. Name and Address of Current I	Penistered Agent			10. If changed, new Registered		Ma. 3		
GRIFFIN, JAMES VICTORIA PARK CENTER 1401 E. BROWARD BLVD., STE. 302 FT. LAUDERDALE FL 33301		Name O A Street Address (PO. Bo Suite, Apl #, etc			Box Number is Not Acceptable) FL Zip Code			
signature (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT	DIA	IMITED	PARTN	JERSHIP OR OTHE		NESS ENTITY		
11. Name(s) of General Partner(s)	11a. Address of Each General (Do NOT Use Post Office Bo	al Partner	11b.	City, State & Zip Code	11c.	Registration/ Document Number		
ARDEN ESTATES-DAVENPORT GP, MIC 1/3:1/13:	ONE EAST BROWARD BLVD		FT. LAUDEHDALE FL 333		L97000000771			
Adver down me rottofe	•		©000027 -03/03/ *****52		7998 73901 26.25	8362 033-001 ****526.25		
				da				
Note: General partners MAY NOT	be changed on this form	n; an am	endmen	t must be filed to ch	ange a g	eneral partner.		
12. I do hereby certify that the information supplied with this Corporations from any liability of non-compliance with 5 this annual report is true and accurate and that my sign empowered to execute this report as required by chapt	Section 119.07(3)(k) in the event that the in ature shall have the same legal effects as er 620, Florida Statutes.	formation supp if made under o	lied is deemed path I further c	exempt from public access. I further	certify that the	information indicated on		
SIGNATURE SEE ATTACH	ED SIGNATURE	BOCK	1	DATE_				