## 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

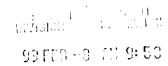


FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

**DOCUMENT#** A97000001569



LOVERS KEY EQUITY PARTNERS, LTD.					
Mailing Address  800 LAUREL OAK DR., STE, 600 NAPLES FL 34108	Principal Office Address  800 LAUREL OAK DR., STE. 600 NAPLES FL 34108		3. Date Formed or Registered 07/17/1997 3a. Date of Last Report 12/16/1997	5a. Capital Contributions as Shown on record. \$2,000.00  5b. Amount of Capital	
2. Mailing Address Suite, Apt. #, etc.	2a. Principal Office Address Suite, Apt. #, etc.		4. State or Country of Formation	Contributions in FLORIDA to date:	
City & State	City & State		6. FEI Number 59-3459428 7. Certificate of Status Desired	Applied For Not Applicable  \$8.75 Additional	
Zip Country	Zip				
801 LAUREL OAK DRIVE, SUITE 640 NAPLES FL 34108  10a. Pursuant to the provisions of sections 620.1051 at for the purpose of changing its registered office of agent. It am familiar with, and accept the obligation of the purpose of sections 620.1051 at SIGNATURE (Registered Agent Accepting Appointment)	r registered agent, or both, in the State of Flo	Suite, Apt. #, etc City  ned limited partnership vide. Such change wa	organized or registered under the laws of the s authorized by its general partner(s). I hereby DATE	accept the appointment of registered	
A GENERAL PARTNER THA MU:	<u>ST BE REGISTERED AN</u>	ID ACTIVE	ARTNERSHIP OR OTHE WITH THIS OFFICE.	R BUSINESS ENTITY	
11. Name(s) of General Partner(s)  EQUITY IN INVESTMENTS & DEV	11a. Address of Each General Control of the Control	3ax Numbers)	NAPLES FL 34108	P97000059519	
Note: General partners MAY NO	T be changed on this form	m; an amend	lment must be filed to cha	nge a general partner.	

Corporations from any sability of non-complianced 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 truster empowered to execute this paper as required by chapter 620, Florida Statutes.

S. Charles Benevett, IB

egal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee

P.C. DATE DEC. 31, 1998

Daytime Telephone Number 941.514.5005