

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

LIMITED PARTNERSHIP
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Sandra B. McRtham
Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT #
A97000001655

WESTWIND REAL ESTATE INVESTMENTS LIMITED
PARTNERSHIP

Mailing Address

12555 HIGH BLUFF DRIVE, SUITE 120
SAN DIEGO CA 92130

Principal Office Address

12555 HIGH BLUFF DRIVE, SUITE 120
SAN DIEGO CA 92130

2. Mailing Address

2a. Principal Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip Country

Zip Country

3. Date Formed or Registered

07/29/1997

3a. Date of Last Report

12/16/1997

4. State or Country of Formation

FL

6. FEI Number

33-0771576

7. Certificate of Status Desired

8. Mark check payable to Dept. of State (See reverse) for fee information

5a. Capital Contributions as
Shown on Record

\$1,000.00

5b. Amount of Capital
Contributions in FLORIDA
to date

☐ Applied For
☐ Not Applicable

☐ \$8.75 Additional
Fee Required

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

Street Address (P.O. Box Number for P.O. Box)

Suite, Apt. #, etc.

City

10. If changed, New Registered Agent/Office

Name

Street Address (P.O. Box Number for P.O. Box)

Suite, Apt. #, etc.

City

400002768174-9

-02/05/99-01088-008

****150.00 ****150.00

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). Thereby 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)

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

11b. City, State & Zip Code

11c. Registration
Document Number

WESTWIND REAL ESTATE INVESTM

12555 HIGH BLUFF DRIV

SAN DIEGO CA 92130

P97000065488

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.

WESTWIND REAL ESTATE INVESTMENTS, INC., ITS General Partner

SIGNATURE By:

Stephen O. Lebrecht, Secretary

Typed or Printed Name of General Partner Signing Form

DATE 12/28/98

Daytime Telephone Number 619/481-3200

CS2E003 (8/98)