

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 L. Morlan
Secretary of State
DIVISION OF CORPORATIONS

A97000002147

FILED

97 DEC 19 PM 12: 53

SECRETARY OF STATE
TALLAHASSEE FLORIDA

1. Name of Limited Partnership

1a. DOCUMENT #
A97000002147

WINDCREST/PALMS, LTD.

Mailing Address
390 N. Orange Avenue
Suite 1100
Orlando, Florida 32801

Principal Office Address
950 N. Orlando Avenue
Suite 320
Winter Park, FL 32789

3. Date Formed or Registered
10/3/97

5a. Capital Contributions as
Shown on records
\$50.00

3a. Date of Last Report
N/A

5b. Amount of Capital
Contributions in FLORIDA
to date
\$50.00

2. Mailing Address

2a. Principal Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. FEI Number
59-3470918

☐ 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

B&C Corporate Services of Central Florida, Inc.
390 North Orange Avenue, Suite 1100
Orlando, Florida 32801

10. If changed, now Registered Agent/Office

Name

3000002382023--3

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

12/24/97-01054-002

Suite, Apt. #, etc.

****156.25 ****156.25

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.

B&C Corporate Services of Central Florida, Inc.

SIGNATURE (Registered Agent Accepting Appointment)

By: [Signature]

DATE 12/17/97

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)

Windcrest/Palms I, Ltd.,
a Florida limited
partnership

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

950 North Orlando Ave.
Suite 320

11b. City, State & Zip Code

Winter Park, FL 32789

11c. Registration/
Document Number

A97000002146

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.

By: Windcrest/Palms I, Ltd., general partner of General Partner

SIGNATURE

Charles B. Palmer, President

DATE 12/12/97

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number (407) 628-4544

CR25003 (6/97)