

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 15 AM 9:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name of Limited Partnership DESTINY DEVELOPMENT, LP		1a. DOCUMENT # A97000002292	
2. Mailing Address 215 MOUNTAIN DRIVE - SUITE 109 DESTIN FLORIDA 32541		2a. Principal Office Address 215 MOUNTAIN DR DESTIN, FLORIDA #109 32541 US	
3. Date Formed or Registered 10/23/97		5a. Capital Contributions as Shown on record \$ 280,000.00	
3a. Date of Last Report N/A		5b. Amount of Capital Contributions in FLORIDA to date: \$ 282,800.00	
4. State or Country of Formation FLORIDA		6. FEI Number 59-3477459 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
7. Certificate of Status Desired <input type="checkbox"/> \$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 BERNHARD ROEGER 215 MOUNTAIN DRIVE SUITE 109 DESTIN, FLORIDA 32541		10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Permitted) 300002402728--8 Suite, Apt. #, etc. -01/16/98-01038-003 ***541.25 ***541.25 City FL Zip Code	
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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) N/A 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
BERNHARD ROEGER	215 MOUNTAIN DRIVE SUITE 109	DESTIN, FLORIDA 32541	A97000002292

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I 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 Bernhard Roeger DATE 12/15/97
Typed or Printed Name of General Partner Signing Form BERNHARD ROEGER Daytime Telephone Number 850-654-0000

CR2E003 (6/97)