

FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1998



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

97 DEC 31 AM 8:48

1. Name of Limited Partnership  
1a. DOCUMENT #  
A 97 0000 02359

Renaissance Partners IX Limited Partnership

Mailing Address  
400 Clematis Street  
Suite 205  
West Palm Beach, FL 33401

Principal Office Address  
400 Clematis Street  
Suite 205  
West Palm Beach, FL 33401

3. Date Formed or Registered  
10-29-97

5a. Capital Contributions as Shown on record  
\$ 7,500.00  
~~\$ 1,600.00~~

3a. Date of Last Report

5b. Amount of Capital Contributions in FLORIDA to date

4. State or Country of Formation  
Florida

6. FEI Number  
 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)

2. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

2a. Principal Office Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

9. Name and Address of Current Registered Agent  
Frisbie, David W.  
400 Clematis Street, Suite 205  
West Palm Beach, FL 33401

10. If changed, new Registered Agent/Office  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
Suite, Apt. #, etc.  
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.

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
Ren GP Corp.	400 Clematis Street Suite 205	West Palm Beach, FL 33401	P 95000028179  100002406071--6 -01/21/88--01022--005 ****156.25 ****156.25 dce
	32.50 103.75		

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.

SIGNATURE David W. Frisbie Officer and Director DATE 12/30/97

Typed or Printed Name of General Partner Signing Form David W. Frisbie Daytime Telephone Number 561-832-7784