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

1. Name of Limited Partnership

SIGNATURE _

Michael J. Sciarrino, President
Typed or Printed Name of General Patrior Signing Form

1a. DOCUMENT # A97000002483

SEMINOLE CO. PARK PLACE PARTNERS, LTD.

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

97 DEC 31 PM 12: 34

DATE: 10,291,817

Daytime Telephone Number _ 407/660-1110

Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record
390 N. Orange Avenue Suite 1100	2200 Lucien Way, Suite 450 Maitland, FL 32751		11/14/97 3a. Date of Last Report	\$50.00
Orlando, FL 32801			N/A	5b. Amount of Capital Contributions in FLORIDA
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation Florida	to date: \$50.00
Suite, Apt. #, etc.	Suite Apt. #, etc.		6. FEI Number Applied for	App'ied For Not Applicable
City & State Zip Country	City & State Zip Country		7. Certificate of Status Desired	\$8.75 Additional Fee Required
Zip Coonity	Zip Country		8. Make check payable to Dept. of State (See reverse side for live information)	
9, Name and Address of Current Registered Agent			10. If changed, new Registered Agent/Office	
B&C Corporate Services of Central Florida, Inc. 390 North Orange Avenue, Suite 1100 Orlando, Florida 32801		Name		
		Street Address (P.O. Box Number Is Not Acceptable)		
		Suite, Apt #, elc.		
		City	FL Zip Code	
10a. Pursuant to the provisions of sections 620 1051 and 62 for the purpose of changing its registered office or registered agent. Lam familiar with, and accept the obligations of SIGNATURE (Registered Agent Accepting Appointment)	stered agent or both, in the State of Flori section 620-192, Florida Statutes.	da Such change was a	uthorized by ils general partner(s). I here	oby accept the appointment of registered
A GENERAL PARTNER THAT IS MUST I	BE REGISTERED ANI	O ACTIVE WI	THERSHIP OR OTHE	R BUSINESS ENTITY
11. Namo(s) of General Partner(s)	11a. Address of Each General (Do NO? Use Post Office Box		City, State & Zip Code	11c. Registration/ Decument Number
CED Capital Holdings IX, Ltd. 2200 Lucien Way Suite 450		Mai	tland, FL 32751	A97000002481
			000002 -01/0 ****	2893210 6 7/9801102015 196.25 ****156.25
Note: General partners MAY NOT be	e changed on this form	an amendme	ent must be filed to cha	nge a general partner.

12. I do hereby certify that the information supplied with the filling is voluntarily (urnished 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: CED Construction, Inc., managing general partner of General Partner