
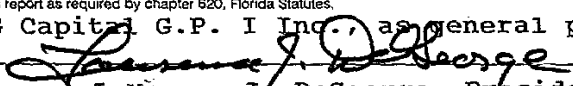


FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
1. Name of Limited Partnership Blue Lake Holdco, Ltd.		1a. DOCUMENT # A97000002509	
Mailing Address 140 Intracoastal Pointe Drive Suite 410 Jupiter, Florida 33477		Principal Office Address Same	
2. Mailing Address Same		2a. Principal Office Address Same	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip Country		Zip Country	
3. Date Formed or Registered 11/17/97		5a. Capital Contributions as Shown on record. \$3,960,000.00	
3a. Date of Last Report 02/16/98		5b. Amount of Capital Contributions in FLORIDA to date: \$3,960,000.00	
4. State or Country of Formation Florida		6. FEI Number 65-0795305	
7. Certificate of Status Desired		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
8. Make check payable to: Dept. of State (See reverse side for fee information)		8.75 Additional Fee Required	
9. Name and Address of Current Registered Agent DeG Capital G.P. I Inc. 140 Intracoastal Pointe Drive Suite 410 Jupiter, Florida 33477		10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City	
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.		500002728375-8 -12/31/98-01078-002 ***526.25 FL ***526.25	
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
DeG Capital G.P. I Inc.	140 Intracoastal Pointe Drive Suite 410	Jupiter, FL 33477	F97000005105
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.			
DeG Capital G.P. I Inc., as general partner			
SIGNATURE BY: 		DATE 12/9/98	
Typed or Printed Name of General Partner Signing Form: Lawrence J. DeGeorge, President		Daytime Telephone Number 561-745-7000	

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 DEC 21 AM 8:41

9/12/31

CR2E003 (8/98)