## FILE ON OR BEFORE APRIL 8,1998 TO AVOID **REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP ANNUAL REPORT 1998



of General Partner Signing Form DANIEL B. Bellows Plas GP

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 FEB 20 PM 12: 17

1. Name of Limited Partnership

**DOCUMENT#** 

	A97000002899					
BLOCK 68 PARTNERSHIP, LTD					DIN OONA BURK OONA HOOF WAA ATIO FOR LOD	
Mailing Address 533 W. NEW ENGLAND AVENUE, SUITE C WINTER PARK FL 32789	Principal Office Address  533 W. NEW ENGLAND AVENUE. SUITE C WINTER PARK FL 32789			3. Date Formed or Registered 12/30/1997 38. Date of Last Report	5a. Cepital Contributions as Shown on record.	
2. Malling Address	2a. Principal Office Address			4. State or Country of Formation	<b>5b.</b> Amount of Capital Contributions in FLORIDA to date:	
·	Cuito Anh # ato			FL		
Suite, Apt. #, etc.	Suite, Apt. #, etc.			6, FEI Number	Applied For	
City & State	City & State		-	7. Certificate of Status Desired	Not Applicable  \$8.75 Additional	
Zip Country	Zip	Country		_	Fee Required State (See reverse side for fee information)	
9. Name and Address of Current Registered Agent			10. If changed, new Registered Agent/Office			
WINTER PARK REDEVELOPMENT MANAGEMENT CORP. 533 W. NEW ENGLAND AVENUE, SUITE C WINTER PARK FL 32789			Winter PARK Reductorment managent Corp.  Street Address (P.O. Box Number is Not Acceptable)  314 HANNIAN Saume East  Suite, Apt. 4, etc.  Syste B  City water Park  FL 32789			
for the purpose of changing its registered office or re agent. I am familiar with, and accept the obligations SIGNATURE (Registered Agent Accepting Appointment)  A GENERAL PARTNER THAT I	of section 620,192, Florida Statutes.	MITED	PART	DATE NERSHIP OR OTHE	2/4/98	
11. Name(s) of General Partner(s)	11a. Address of Each General		11b.	City, State & Zip Code	11c. Registration/ Document Number	
WINTER PARK REDEVELOPMENT MA	P.O. BOX 350		WINTER PARK FL 32790		P94000038528	
					A J	
(*):				700002 -03/04 ****1	4472279 /8801098004 41.25 ****141.25	
Note: General partners MAY NOT  12. I do hereby certify that the information supplied with this Corporations from any liability of non-compliance with 5 this annual report is true and accurate and that my sign empowered to execute this report as required by chapt SIGNATURE	s filing is voluntarily furnished and does not section 119.07(3)(k) in the event that the Infi lature shall have the same legal effects as i	qualify for the ormation suppli	exemption ied is deen	stated in Section 119.07(3)(k), Florida ned exempt from public access. I furthe	Statutes. I release the Division of er certify that the information indicated on	

407-644-3151