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

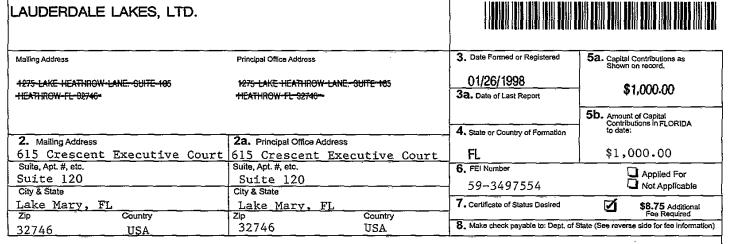
1. Name of Limited Partnership

DOCUMENT# A98000000243

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 DEC 29 PM 2: 46

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9. Name and Address of Current Registered Agent	10. If changed, new Registered Agent/Office		
GRAY, N. DWAYNE JR.,ESQ C/O GREENSPOON, MARDER, ET AL 135 WEST CENTRAL BLVD., SUITE 1100	Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc.		
ORLANDO FL 32801	City FL Zip Code		
	' ,		

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-hamed 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)

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/
LAUDERDALE LAKES, INC.	#275 LAKE HEATHROW LA- 615 Crescent Executive Court, Suite 120	-01/05/99	P9800007784 B10910 -01092001 .00 *****150.00

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 Pertner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

Typed or Printed Name of General Partner Signing Form

Lauderdale Lakes Jonathan L. Wolf, President ... Daytime Telephone Number



ACCOUNT NO. : 072100000032

REFERENCE: 081409 5011958

AUTHORIZATION :

COST LIMIT : \$ PREPAID

ORDER DATE: December 29, 1998

ORDER TIME : 12:05 PM

ORDER NO. : 081409-040

CUSTOMER NO: 5011958

CUSTOMER: Ms. Sandra M. Graham

Greenspoon Marder Hirschfeld 135 West Central Blvd Ste 1100

South Trust Bank Building

Orlando, FL 32801

ANNUAL REPORT FILING

STAISUME OF HORPORALION

NAME:

LAUDERDALE LAKES, LTD.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Robert Maxwell

EXAMINER'S INITIALS: