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#

FILED 1/6 98 NOV -9 PM 4: 04 SECRETARY OF STATE

	A98000000334			TALLAHASSEE FLO	Kinu	
LONGWOOD INDUSTRIAL CENTER, LTD.						
Mailing Address	Principal Office Address			3. Date Formed or Registered	5a. Capital Contributions as Shown on record.	
2200 LUCIEN WAY, SUITE 350 MAITLAND FL 32751	2200 LUCIEN WAY. SUITE 350 MAITLAND FL 32751			02/03/1998 3a. Date of Last Report	\$441,000.00	
			1	4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:	
2. Mailing Address	2a. Principal Office Address			FL	ध्या ०००. ००	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			6. FEI Number	Applied For	
City & State	City & State	City & State		7. Certificate of Status Desired S8 75 additional		
Zip Country	Zip	Country			\$8.75 Additional Fee Required tate (See reverse side for fee Information)	
9. Name and Address of Current Registered Agent		10. If changed, new Registered Agent/Office Name				
TATICH, PHILIP 341 NORTH MAITLAND AVE., SUITE 340 MAITLAND FL 32751		Street Address (P.O. Box Number Is Not Acceptable)				
		Suite, Apt. #, etc.				
		City	-		FL Zip Code	
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 (Do NOT Use Post Office Bo	l Partner x Numbers)	11b.	City, State & Zip Code	11c. Registration/ Document Number	
AEGIS INVESTMENTS, INC.	2200 LUCIEN WAY, SUIT		MAI	TLAND FL 32751	L28441	
FREESE DEVELOPMENT CORP.	698 LONG LAKE DRIVE		OVIEDO FL 32765		P98000010869	
				900002 -11/10 *****5	6849399 /9801086024 26.25 ****526.25 *	
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						

72.	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 cath. I further certify that I am a General Partner of the limited partnership, receiver or truste
	empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE	
Typed or Printed Name of General Partner Signing Form	Daytime Telephone Number