

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

LIMITED PARTNERSHIP ANNUAL REPORT <b>1999</b>	 FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
---	--

FILED

99 JAN -5 PM 3:27

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. Name of Limited Partnership  Wesley Scott Place, Ltd.	1a. DOCUMENT # <b>A98000000615</b>
--	---------------------------------------

Mailing Address 1520 Cooper Hill Road Birmingham, Alabama 35210	Principal Office Address	3. Date Formed or Registered 3/5/98	5a. Capital Contributions as Shown on record. \$10.00 \$100.00
2. Mailing Address 1520 Cooper Hill Road Suite, Apt. #, etc.	2a. Principal Office Address 1520 Cooper Hill Road Suite, Apt. #, etc.	3a. Date of Last Report N/A	5b. Amount of Capital Contributions in FLORIDA to date: \$10.00
City & State Birmingham, AL	City & State Birmingham, AL	4. State or Country of Formation Florida	6. FEI Number 63-1194446 <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
Zip 35210	Zip 35210	Country	7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
8. Make check payable to: Dept. of State (See reverse side for fee information)			

9. Name and Address of Current Registered Agent John P. Daniel, Esquire Beggs & Lane 3 West Garden Street Pensacola, FL 32501	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code
---	---

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.

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) Wesley Scott Place - a Methodist Home for the Aging, Inc.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 1520 Cooper Hill Road	11b. City, State & Zip Code Birmingham, AL 35210	11c. Registration/Document Number N98000000827
--	--	---	---

800002747058--4  
-01/20/99--01015--003  
\*\*\*\*150.00 \*\*\*\*150.00

CR2E003 (8/98)

**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.

SIGNATURE

*Fred M. Jackson, III*

DATE

12-28-98

Typed or Printed Name of General Partner Signing Form

Fred M. Jackson, III, as President of

Daytime Telephone Number

(205) 951-2442

Wesley Scott Place - a Methodist Home for the Aging, Inc.