## 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

FILED GECRETARY OF STATE DIVISION OF CORPORATIONS

98 DEC 28 PM 1: 02

1. Name of Limited Partnership	A9800000				
WELLINGTON PLACE AT KENSINGTON, LTD.					
Mailing Address	Principal Office Address	Principal Office Address		5a. Capital Contributions as Shown on record.	
8465 MYSTIC GREENS WAY. SUITE 2201 NAPLES FL 34113	8465 MYSTIC GREENS WAY. SUITE 2201 NAPLES FL 34113		04/03/1998 3a. Date of Last Report	\$301,000.00	
			4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:	
2. Mailing Address	2a. Principal Office Address	2a. Principal Office Address		1,500,000.00	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		Applied For Not Applicable	
City & State	City & State	City & State		\$8.75 Additional	
Zip Country	Zip	Zip Country		Fee Required State (See reverse side for fee information)	
9. Name and Address of Current Registered Agent			10. If changed, new Registered	10. If changed, new Registered Agent/Office	
		Name 534-25			
	PRICE, R. SCOTT ESQ.  C/O KELLY, PRICE, ET AL  2640 GOLDEN GATE PARKWAY, SUITE 315  Suite, A		ddress (P.O. Box Number is Not Acceptable)		
			#, etc.		
NAPLES FL 34105		City	FL 3/79\/		
10a. Pursuant to the provisions of sections 620.1051 and for the purpose of changing its registered office or reagent. I am familiar with, and accept the obligations	egistered agent, or both, in the State of Flo	ed limited partnership rida. Such change was	organized or registered under the laws of the authorized by its general partner(s). I hereby	State of Florida, submits this setement accept the appointment of negistered	
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)	Address of Each General (Do NOT Use Post Office E		b. City, State & Zip Code	11c. Registration/ Document Number	
WELLINGTON PLACE AT KENSINGT	8465 MYSTIC GREENS WA		NAPLES FL 34113	P97000098321	
			900002 -01/07. ****22	7333690 /9901068006 76.25 ****526.25	
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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 filling 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 papert as required chapter 620. Florida St

SIGNATURE L

Typed or Printed Name of General Partner Signing Form

Arthur L. Bateman for Wellington Place at Kensington, Inc.

Daytime Telephone Number

(941)