

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
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FILED

98 DEC 31 PM 4:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



1. Name of Limited Partnership BRISTOL PLACE, LTD.	1a. DOCUMENT # A98000000851
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Mailing Address 450 CHALLENGER ROAD CAPE CANAVERAL FL 32920	Principal Office Address 450 CHALLENGER ROAD CAPE CANAVERAL FL 32920	3. Date Formed or Registered 04/03/1998	5a. Capital Contributions as Shown on record. \$1,000.00
		3a. Date of Last Report	5b. Amount of Capital Contributions in FLORIDA to date:
2. Mailing Address Suite, Apt. #, etc. City & State Zip Country	2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country	4. State or Country of Formation FL	6. FEI Number 59-35370-19
		7. Certificate of Status Desired	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
		8. Make check payable to: Dept. of State (See reverse side for fee information)	<input type="checkbox"/> \$8.75 Additional Fee Required

9. Name and Address of Current Registered Agent POOP, GREGORY A ESQ 450 CHALLENGER ROAD CAPE CANAVERAL FL 32920	10. If changed, new Registered Agent/Office Name: Michael A. Hartman Street Address (P.O. Box Number is Not Acceptable): 450 Challenger Road Suite, Apt. #, etc.: City: Cape Canaveral FL Zip Code: 32920
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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) M. A. Hartman DATE 12/28/98

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) HERITAGE BRISTOL, INC.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 450 CHALLENGER ROAD	11b. City, State & Zip Code CAPE CANAVERAL FL 329	11c. Registration/Document Number P98000030954
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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 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 Alison Kerr-Hull Colvard, V.P. of G.P. DATE 12/28/98
 Typed or Printed Name of General Partner Signing Form **ALISON KERR - HULL COLVARD** Daytime Telephone Number 407-799-4090 x284

CR2E003 (8/98)