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

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SECRETARY OF STATE

	A3000001021		J RELAMASSEE, FLORIDA			
SNELL & ASSOCIATES HOMES, LTD.						
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.	7	
3655 BONITA BEACH ROAD. #3 BONITA SPRINGS FL 34134	3655 BONITA BEACH ROAD. #3 BONITA SPRINGS FL 34134		04/23/1998 3a. Date of Last Report	\$25,000.00		
				A 211 - 2 - 15 - 15	5b. Amount of Capital Contributions in FLORIDA to date:	
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	io date,		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For	1	
City & State	City & State		59-351 R 9 50 7. Certificate of Status Desired	Not Applicable	-	
Zip Country	Zip Country			\$8.75 Additional Fee Required	-	
0 11						
9. Name and Address of Current Registered Agent LIEBERFARB, STANLEY J 4001 NORTH TAMIAMI TRAIL, SUITE 330 NAPLES FL 34103		10. If changed, new Registered Agent/Office Name				-
		Street Address (P.O. Box Number Is Not Acceptable) Sulte, Apt. #, etc.				
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 I	artner	11b.	City, State & Zip Code	11c. Registration/ Document Number	
SNELL CONSTRUCTION, INC.			BON	ITA SPRINGS FL 341		CR2E003 (8/98)
				1 000027 -91/13/ ****179	409118: 901101048 5.00 ****175.00	CR2E
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 filin Corporations from any liability of non-compliance with Secti this annual report is true and accurate and that my signatur empowered to execute this report as required by chapter 60	on 119,07(3)(k) in the event that the infor a shall have the same legal effects as if n	mation supplier	d is deeme	d exempt from public access. I further ce	rtify that the Information Indicated on	
SIGNATURE						
ped or Printed Name of General Partner Signing Form						