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# A98000001554

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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RIC	DEAF	OPMENT	LID.

				t (3010)) (310 1314) (011) 081(t 0	UZIL 80111 0867 00106 71001 8110 81661 0181 1886			
Mailing Address	Principal Office Address		3	Date Formed or Registered	5a. Capital Contributions as Shown on record.			
1180 SPRING CENTRE SOUTH BLVD., SUITE 211	1180 SPRING CENTRE SOUTH BLVD., SUITE 211 ALTAMONTE SPRINGS FL 32714			06/25/1998				
ALTAMONTE SPRINGS FL 32714			3	a. Date of Last Report	φ 100,0 17.20			
					5b. Amount of Capital Contributions in FLORIDA			
2. Mailing Address	2a. Principal Office Address		4	State or Country of Formation	to date:			
Thomas Addison	Zer i ilimpai Onice Address			FL				
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6	FEI Number	Applied For			
City & State	City & State			59-3520872	Not Applicable			
			7	. Certificate of Status Desired	\$8.75 Additional Fee Required			
Zip Country	Zip Country		8	Fee Required 8. Make check payable to: Dept. of State (See reverse side for fee information)				
9. Name and Address of Current Reg	istered Agent	10. If changed, new Registered Agent/Office						
LUBINSKY, TERRY		Name						
1180 SPRING CENTRE SOUTH BLVD., SUITE	Street Address (P.O. Suite, Apt. #, etc. City		ss (P.O. Box N	(P.O. Box Number is Not Acceptable)				
ALTAMONTE SPRINGS FL 32714			, etc.					
			·	FL Zp C Zp C				
10a. Pursuant to the provisions of sections 620.1951 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)	Address of Each General F (Do NOT Use Post Office Box	artner Numbers)	11b.	City, State & Zip Code	11c. Registration/ Document Number			
RTC DEVELOPMENT CORP.	1180 SPRING CENTRE SO		ALTAMONTE SPRINGS FL		J56472			
•				000002 -11/19 ****5	5917500 79801079014 36.25 ****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 flability 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.