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

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # A98000001720

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OREGON PARTNERS NO. 17, LIMITED PARTNERSHIP

			C81195	
Mailing Address	Principal Office Addr	ess	3. Date Formed or Registered	5a. g
C/O BARCLAY GROUP 1123 OVERCASH DRIVE	C/O BARCLAY GR		07/20/1998 3a. Date of Last Report	
DUNEDIN FL 34698	DUNEDIN FL 3469	8		5b.
2. Mailing Address	2a. Principal Off	ice Address	4. State or Country of Formation	,
Suite, Apt. #, etc.	Suite, Apt #, etc		6, FEI Number	ŀ
City & State	City & State		5-9-35-225-87 7, Certificate of Status Desired	
Z ₁ p Country	Ζφ	Country	8. Make the Apparation to Dept. (ــا State (Se.
	.		1	

3. Date Formed or Registered	5a. Capital Contributions as Shown on record
07/20/1998 3a, Date of Last Report	\$100.00
4. State or Country of Formation	5b. Amount of Capital Contributions in FLORODA to date
FL	
6, FET Number	Applied For
59-3522	S & D Not Applicable
7. Certificate of Status Desired	\$8.75 Anditional Fee Required
8. Make Check payable to Dept of t	State (Secretarise side for fee in formation

9. Name and Address of Current Registered Agent	10. If changed, new Registered Agent/Office
	Name
HUDOBA, STEPHEN M 101 EAST KENNEDY BLVD., STE 3700	Street Address (P.O. Box Number Is Not Acceptable)
TAMPA FL 33602	Suite, Apt. #, etc.
	FL Zp 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 Floridal submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was anthonzed by its general partner(s). Thereby 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);

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 Partner (Do NOT Use Post Office Box Numbers)

11b.

City, State & Zip Code

11c. Registration' Document Number

OREGON PROPERTIES, INC.

1123 OVERCASH DRIVE

DUNEDIN FL 33602

J14545

800002761978---4 -02/02/39---01063---016 ***3068.75 ****141.25

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 thy first is evolutionarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Fronda Statutes. I retease the Division of Corporations from any liability of non-corporatine with Set its 119 07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicates on this annual report is true and accurate and that my shapping shall have the sample legal effects as if made under oath. I further certify that I am a General Partner of the holded partnership, receiver or trustee empowered to execute this report as required by children of the holded partnership.

SIGNATURE /

Onniel C. Viello Typed or Printed Name of General Partner Signing Form

DATE 14 30 98

Daytinic Telephone Number (727) 733 7585