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

Sandra B. Morthan

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # A9800001803

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 JAN -5 AM 10: 07

COURTNEY VILLAGE LIMITED PARTNERSHIP				(1) 122 (2) 122			
Mailing Address	Principal Office Address			3. Date Formed or Registered	5a. Capital Contributions as Shown on record.		
250 INTERNATIONAL PARKWAY. SUITE 220 HEATHROW FL 32746	250 INTERNATIONAL PARKWAY. SUITE 220 HEATHROW FL 32746			07/29/1998 3a. Date of Last Report	\$4,215,000.00		
					5b. Amount of Capital Contributions in FLORIDA to date:		
2. Mailing Address	2a. Principal Office Address	2a. Principal Office Address		4. State or Country of Formation	to date:		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		FL 6. FEI Number		Applied For	
City & State	City & State	City & State		59-352317	- 3523170 Not Applicable		
Zip Country	Zip	Zip Country		7. Certificate of Status Desired \$8.75 Additional Fee Required			
			[8. Make check payable to: Dept. of S	tate (See rev		
9. Name and Address of Current Registered Agent		T	10. If changed, new Registered Agent/Office				
OGIER, GERALD D 250 INTERNATIONAL PARKWAY, SUITE 2S20 HEATHROW FL 32746		Name Street Address (P.O. Box Number Is Not Acceptable)					
		Suite, Apt. #, etc.					
	City			FL Zip 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 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)	11a. Address of Each General (Do NOT Use Post Office Bo	I Partner ox Numbers)	11b.	City, State-& Zip Code	11c.	Registration/ Document Number	
COURTNEY VILLAGE DEVELOPMENT	250 INERNATIONAL PKWY		HEATHROW FL 32746		P98000046770		
				2000027526126 -01/25/9901011016 *****526.25 *****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

empowered to execute this report as required by chanter 620, Florida Statutes.

SIGNATURE

Typed or Printed Name of General Partner Signing Form

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

Daytime Telephone Number