FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

	LIMITED PARTNERSHIF ANNUAL REPORT 1999
I _	Name of Limited Partnership



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED

GROFC 31 AMIN: 54

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1. Name of Limited Partnership	1a. DOCUMENT # A98000001890		SECRETARY OF STATE TALLAHASSEE, FLORIDA			
TEMPUS RESORTS MANAGEME						
Mailing Address	Principal Office Address	-	3. Date Formed or Registered	5a. Capital Contributions as Shown on record.		
THE BELZ MALL ANNEX 1 5259 WEST-OAKRIDGE-ROAD ORLANDO FL-32819	THE BELZ MALL ANNEX 1 5 259 WEST OAKRIDGE ROAD *ORLANDO-FL-92819*		08/06/1998 3a. Date of Last Report // A	\$7,462.50 5b. Amount of Capital Contributions in FLORIDA		
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	to date:		
7380 Sand Lake Rd.	7380 Sand Lake Rd.		FL			
Suite, Apt. #, etc. 5 +e. 600 City & State	Suite, Apt. #, etc. 5+e. 600 City & State		6. FEI Number 59-3535537	Applied For Not Applicable		
011001,000	tando FL Orlando FL		7. Certificate of Status Desired	\$8.75 Additional Fee Required		
32819 USA	· ·	Country USA	8. Make check payable to: Dept. of S	iate (See reverse side for fee information)		
9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office						
KP&L-SERVICES, INC. 390 NORTH ORANGE AVENUE, SUITE 600 -ORLANDO FL-32801		Name Joseph Panzl Alderman, Bryant & Von, P.A. Street Address (P.O. Box Number Is Not Acceptable) III N. Drange Ave Suite, Apt. #, etc. Stee. 920 City Oblando FL 32801				
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 DATE						
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 Box		City, State & Zip Code	11c. Registration/ Document Number		
TEMPUS MARKETING INTERNATIONAL,	ING 7380 SAND LAKE RD		LANDO FL 32819	P98000014686 (8/8)		
	5 TE . 400			7446:08—-5 9301103026 0.00 ****150.00		
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.						
12. Ide 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 DATE DATE						
Typed or Printed Name of General Partner Signing Form LON LEVENTHAL, PRESIDENT Daytime Telephone Number 407-226-1000						