


FILE ON OR BEFORE APRIL 7, 1999 TO AVOID
REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999			FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
1. Name of Limited Partnership MORTGAGE INVESTMENT GROUP 20, LTD.		1a. DOCUMENT # A98000001988		
Mailing Address 307 SOUTH 21ST AVENUE HOLLYWOOD FL 33020		Principal Office Address 307 SOUTH 21ST AVENUE HOLLYWOOD FL 33020		3. Date Formed or Registered 08/24/1998
2. Mailing Address		2a. Principal Office Address		3a. Date of Last Report
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. State or Country of Formation FL
City & State		City & State		5a. Capital Contributions as Shown on record \$2,500,000.00
Zip Country		Zip Country		5b. Amount of Capital Contributions in FLORIDA to date
				<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
				6. FEI Number
				7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
				8. Make check payable to: Dept. of State (See reverse side for fee information)

FILED

99 FEB 16 AM 10:37

SECRETARY OF STATE



9. Name and Address of Current Registered Agent BIRDMAN, HARVEY 307 SOUTH 21ST AVENUE HOLLYWOOD FL 33020	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code
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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) LAKESHORE CLUB DEVELOPMENT,	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 307 SOUTH 21ST AVENUE	11b. City, State & Zip Code HOLLYWOOD FL 33020	11c. Registration/Document Number P98000070624
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2-19-99

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 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

Typed or Printed Name of General Partner Signing Form

Louis Birdman

Daytime Telephone Number

2/10/99
954-922-6070

CR2E003 (12/98)