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

LIMITED PARTNERSHIP ANNUAL REPORT 1999



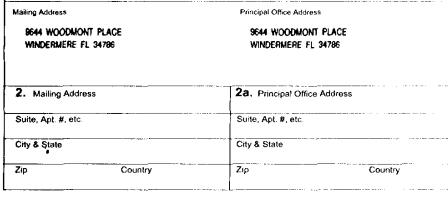
FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # A98000002016

HATLEY TANNER PARTNERSHIP, LTD.



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3. Date Formed or Registered	5ag Capital Contribution das
08/28/1998	
3a. Date of Last Report	473,681.00
	5b. Amount of Capital Contributions in FLORIDA
4. State or Country of Formation	to date
FL	\$ 473,681.00
6. FE! Number	[] Applied For
59-3528668	Not Applicable
7. Certificate of Status Desired	\$8.75 Additional Fee Required

9. Name and Address of Current Registered Agent	10. If changed, new Registered Agent/Office	
PALMER, PHYLLIS M	Name Wanda Hatley	
1 900 BOOTHE CIRCLE L ONGWOOD FL 32750	Street Address (P.O. Box Number Is Not Acceptable) 9644Woodmont_Place Suite, Apt #, etc	
	Windermere FL 34786	

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). 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.	1. Name(s) of General Partner(s)		
	HATLEY, JAMES R TRUSTEE		
	HATLEY, WANDA L TRUSTEE		

11a. (Do NOT Use Post Office Box Numbers) 9644 WOODMONT PLACE 9644 WOODMONT PLACE

City, State & Zip Code

WINDERMERE FL 34786 WINDERMERE FL 34786

Registration/

04/23/99 -01103 --005 ****S281.25 ****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 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, Fiorida Statutes.

Daytime Telephone Number