


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 Secretary of State DIVISION OF CORPORATIONS	
1. Name of Limited Partnership Seneca Development, LTD		1a. DOCUMENT # A98000002198	
Mailing Address 7619 Little Road Suite 310 New Port Richey, FL 34654		Principal Office Address same	
2. Mailing Address 7619 Little Road Suite, Apt. #, etc. 310 City & State New Port Richey, FL Zip 34654		2a. Principal Office Address same Suite, Apt. #, etc. City & State Zip Country	
3. Date Formed or Registered 9/1/98		5a. Capital Contributions as Shown on record. 1,000.00	
3a. Date of Last Report		5b. Amount of Capital Contributions in FLORIDA to date: 1,000.00	
4. State or Country of Formation Florida		6. FEI Number 593534566 <input checked="" type="checkbox"/> Applied For Not Applicable	
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)	
9. Name and Address of Current Registered Agent Anthony Gigliotti 7619 Little Road Suite 310 New Port Richey, FL 34654		10. If changed, new Registered Agent/Office 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) Geneva Realty Of Tampa Bay, Inc.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 7619 Little Road Suite 310	11b. City, State & Zip Code New Port Richey FL 34654	11c. Registration/Document Number P98000068430 500002732705--0 -01/06/99-01035--001 ****141.25 ****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 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 effect 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 _____ Typed or Printed Name of General Partner Signing Form _____		DATE 12/17/98 Daytime Telephone Number _____	

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 DEC 21 AM 11:23

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