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

LIMITED PARTNERSHIP ANNUAL REPORT 1999



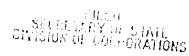
FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # **A9800002276**

TASKER DEVELOPMENT LIMITED PARTNERSHIP



99 MAR 30 PM 4: 11



			3. Date Formed or Registered	5a. Capital Contributions as
ailing Address	Principal Office Address			Shown on record
3157 CRAYTON ROAD NAPLES FL 60041-	3157 CRAYTON ROAD NAPLES FL 80941*		10/02/1998	\$10,000.00
WALES TO SOOT	MATLES TE 100341		3a. Date of Last Report	
				5b. Amount of Capital Contributions in FLORIDA
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	to dale
			FL FL	
uite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For
ity & State	City & State			Not Applicable
			7. Certificate of Status Desired	\$8.75 Additional Fee Required
ip Country 19703	Zip Country 341 03		8. Make check payable to Dept of State (See reverse side for fee inform	
			4	
9. Name and Address of Curre	nt Registered Agent		10. If changed, new Registered	Agent/Office
GORDON, BRUCE H		Name		
C/O SHUMAKER, LOOP & KENDRICK, LLP		Street Address	(P.O. Box Number Is Not Acceptable)	
101 EAST KENNEDY BLVD., SUITE 2800		Suite, Apl. #, et		
TAMPA FL 33602				
		City Fi Zip Code		Zip Code
agent. I am familiar with, and accept the obligatio	ns of section 620.192, Florida Statutes.			
A GENERAL PARTNER THA				ER BUSINESS ENTI
A GENERAL PARTNER THA	ST BE REGISTERED A	ND ACTIVE	ARTNERSHIP OR OTH WITH THIS OFFICE.	Parietration
A GENERAL PARTNER THA		ND ACTIVE	ARTNERSHIP OR OTH	ER BUSINESS ENTI
A GENERAL PARTNER THA	ST BE REGISTERED A	ND ACTIVE at Partner ox Numbers) 1	ARTNERSHIP OR OTH WITH THIS OFFICE.	44a Registration/
MU:	ST BE REGISTERED AN Address of Each Genera 11a. (Do NOT Use Post Office Br	ND ACTIVE at Partner ox Numbers) 1	ARTNERSHIP OR OTH WITH THIS OFFICE. 1b. City, State & Zip Code	11c. Registration/ Document Number
A GENERAL PARTNER THAM MUST Name(s) of General Partner(s)	ST BE REGISTERED AN Address of Each Genera 11a. (Do NOT Use Post Office Br	ND ACTIVE at Partner ox Numbers) 1	PARTNERSHIP OR OTH WITH THIS OFFICE. 1b. City, State & Zip Code NAPLES FL 33940	11c. Registration/ Document Number P95000021948
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SIGNATURE MEMBER D

execute this report as required chapter 620, Florida Statutes

SERBMIAH B. TACKER

DATE 3.26.1999

R Davtime Telephone Number

CR2E003 (12/98)