

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 Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 99 JAN -4 PM 4: 30	
1. Name of Limited Partnership AZALEA PLACE APARTMENTS, LIMITED		1a. DOCUMENT # A98000002435			
Mailing Address Principal Office Address		3. Date Formed or Registered 9/26/98		5a. Capital Contributions as Shown on record. 2,000.00	
		3a. Date of Last Report N/A		5b. Amount of Capital Contributions in FLORIDA to date: 2,000.00	
2. Mailing Address 322 BANYAN BLVD. Suite, Apt. #, etc.		2a. Principal Office Address 322 BANYAN BLVD. Suite, Apt. #, etc.		4. State or Country of Formation FLORIDA	
City & State WEST PALM BEACH, FL		City & State WEST PALM BEACH, FL		6. FEI Number 65-0882803	
Zip 33401		Country USA		7. Certificate of Status Desired <input checked="" 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 PAULA J. RYAN 322 BANYAN BLVD. WEST PALM BEACH, FL 33401		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)		11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)		11b. City, State & Zip Code	
WHITE OAK ASSOCIATES III, INC.		322 BANYAN BLVD.		WEST PALM BEACH, FL 33401	
S.P. AZALEA, INC.		3000 GOLF TO BAY BLVD SUITE 300		CLEARWATER, FL 33759	
		BR 1/4/99		200002785862--9 -01/11/99--01008--013 ****150.00 ****150.00	
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 Paula J. Ryan		DATE 12-28-98			
Typed or Printed Name of General Partner Signing Form PAULA J. RYAN		Daytime Telephone Number 561-838-8886			

CR2E003 (8/98)