FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHII
ANNUAL REPORT
1999
1. Name of Limited Partnership



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Name of Limited Partnership	1a.
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N.E.

DOCUMENT#

W11/25

98 NOV 23 PM 1:00

Name of Limited Partnership	A98000002501		SECRETARY OF STATE TALLAHASSEE FLORIDA	
Creative Choice Homes >	<pre> ⟨VI, Ltd.</pre>			
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.
4243-D Northlake Blvd.	4243-D Northla	ke Blvd.	11/4/98	
Palm Beach, Gardens, FL	Palm Bch Gardens, FL		3a. Date of Last Report	
33410		33410		5b. Amount of Capital Contributions in FLORIDA
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	to date:
Z. Mailing Address	Za. Philopai Onice Address		FL	\$7,500.00
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6, FEI Number	Applied For
City & State	City & State		65-0873895	Not Applicable
Zip Country	7io	Country	7. Certificate of Status Desired	\$8.75 Additional Fee Required
Zip Country	Zip	Country	8. Make check payable to: Dept, of	State (See reverse side for fee information)
0 N		T	10 //	
9. Name and Address of Current Re	igistered Agent	Name	10. If changed, new Registered	1 AgenyOffice
Street Address (P.O. Box Number Is Not Acceptable)				
Barot, Dilip c/o Creative Choice Homes XVI, Inc. Suite. Apr. #, etc.		······································		
4243-D Northlake Blvd.	Site, Apr. W, etc.			Zip Code
Palm Beach Gardens, FL 3	3410			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) A GENERAL PARTNER THAT IS	A CORPORATION I	MITED PART	NERSHIP OR OTHE	
MUST	BE REGISTERED ANI	D ACTIVE WIT	TH THIS OFFICE.	T DOGINE DOG ENTITIE
11. Name(s) of General Partner(s)	11a. Address of Each Genera (Do NOT Use Post Office Bo	Partner x Numbers) 11b.	City, State & Zip Code	11c. Registration/ Document Number
Creative Choice Homes XVI, In		hlake Palı Blvd.	n Beach Gardens FL 33410 4000026 -12/017	, A98000002501 99294——7 801076002 1.25 ****141.25
Note: General partners MAY NOT b	e changed on this form	; an amendme		

12. I do hereby certify that the information supplied with this filling 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.

	Deretary Crestive hora Houses XVI, From GP DATE 11.12-98
Typed or Printed Name of General Partner Signing Form Anitra Dlanci, Secy Daylime Telephone Number 561-627-7988 R	