

FILE ON OR BEFORE DECEMBER 31, 1998. LATE FILING
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

FILED

99 DEC 18 PM 4:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name of Limited Partnership Red Stick Golf Investments, Ltd.		1a. DOCUMENT # A98000002553	
Mailing Address 5070 North Highway A-1-A, Suite 200 Vero Beach, FL 32963		Principal Office Address Same	
2. Mailing Address See Above		2a. Principal Office Address See Above	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip		Country	
3. Date Formed or Registered 11/12/98		5a. Capital Contributions as Shown on record, \$1.00	
3a. Date of Last Report N/A		5b. Amount of Capital Contributions in FLORIDA to date: \$1.00	
4. State or Country of Formation FL		6. FEI Number <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> 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 William W. Caldwell 756 Beachland Boulevard Vero Beach, FL 32963		10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. 4000002726324--9 City -12/30/98--01056--005 ****141.25 FL****141.25	
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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	11c. Registration/Document Number
Red Stick Acquisition Corporation	890 Seaward Dr.	Indian River Shores FL 32963	P98000069543

[Handwritten signature]
12-29

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

Warren Schwerin, President

DATE **12-10-98**

Red Stick Acquisition Corporation

561-231-3029

Typed or Printed Name of General Partner Signing Form

General Partner

Daytime Telephone Number