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

LIMITED PARTNERSHIP ANNUAL REPORT 1999

M.C. REALTY GROUP, LTD.



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORP RATIONS

1. Name of Limited Partnership

DOCUMENT # A98000002567

SECRETARY OF STATE DIVISION OF CORPORATIONS

99 DEC -2 PM 4: 57



Aailing Address	Principal Office Address 6000 FAIRVIEW ROAD. SUITE 1150		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.
* 6000 FAIRVIEW ROAD. SUITE 1150			11/16/1998	\$416,500.00
CHARLOTTE NC 28210	CHARLOTTE NC 28210	CHARLOTTE NC 28210		V 1,10,100
المساور المستحدين والمراجع المستحد				5b. Amount of Capital Contributions in FLORIDA
			4. State or Country of Formation	to date:
2. Mailing Address	2a. Principal Office Address	2a. Principal Office Address		\$450,000.00
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For
20. 4.0.4	City & State		58-2426501	Not Applicable
City & State	Only a State		7. Certificate of Status Desired	\$8.75 Additional
Zin Country	Zip	Country	- C - Make shock payable to: Dopt of	Fee Required State (See reverse side for fee information
			O. Make Cleck payable to Dopt. of	orato (Dec Lovoide and tel Be men
9. Name and Address of Cu	urrent Registered Agent		10. If changed, new Registered	Agent/Office
FORMAN, ROBERT S ESQ. 2101 WEST COMMERCIAL BLVD., SUITE 4100 FURT LAUDERDALE FL-33309		Name 3000030819038		
		-12/29/99 -11154 -1014 Street Address (P.O. Box Number Is Not Acceptable)		
		****526.25 ****526.25		
		Suite, Apt. #, etc.		
		City City		Zip Code
	and the second second section in the second	Clasida Custisbanasis	o organized or registered under the laws of th	by accept the appointment of registered
agent. I am familiar with, and accept the oblig	ce or registered agent, or both, in the State of lations of section 620.192, Florida Statutes.	Florida. Such change w	as authorized by its general partner(s). I here	by accept the appointment of registered
agent. I am familiar with, and accept the oblig	ce or registered agent, or both, in the State of Ingations of section 620.192, Florida Statutes.	Florida. Such change w	as authorized by its general partner(s). I here DATE ARTNERSHIP OR OTH	by accept the appointment of registered
agent. I am familiar with, and accept the oblig SIGNATURE (Registered Agent Accepting Appointmen A GENERAL PARTNER TH M	ce or registered agent, or both, in the State of lipations of section 620.192, Florida Statutes. INTIMATIS A CORPORATION IUST BE REGISTERED A	N, LIMITED PAND ACTIVE	ARTNERSHIP OR OTH WITH THIS OFFICE.	ER BUSINESS ENTIT
agent. I am familiar with, and accept the oblig SIGNATURE (Registered Agent Accepting Appointmen A GENERAL PARTNER TH M	ce or registered agent, or both, in the State of Ingations of section 620.192, Florida Statutes.	N, LIMITED PAND ACTIVE	as authorized by its general partner(s). I here DATE ARTNERSHIP OR OTH	ER BUSINESS ENTIT
agent. I am familiar with, and accept the oblig	ce or registered agent, or both, in the State of lipations of section 620.192, Florida Statutes. INTIMATIS A CORPORATION IUST BE REGISTERED A	N, LIMITED P AND ACTIVE (eral Partner (Box Numbers)	ARTNERSHIP OR OTH WITH THIS OFFICE.	ER BUSINESS ENTIT
agent. I am familiar with, and accept the oblig SIGNATURE (Registered Agent Accepting Appointmen A GENERAL PARTNER TH M 11 Name(s) of General Partner(s)	LAT IS A CORPORATION Address of Each Gen Address of Each Gen LOD NOT Use Post Office	N, LIMITED PAND ACTIVE BOX Numbers) - 1:	DATE ARTNERSHIP OR OTH WITH THIS OFFICE. 1b.——City, State & Zip Code	ER BUSINESS ENTIT
agent. I am familiar with, and accept the oblig SIGNATURE (Registered Agent Accepting Appointmen A GENERAL PARTNER TH M 11. — Name(s) of General Partner(s) - DIXIE MANOR, INC. *Faith_Realty, Inc.	Address of Each Gen 106 ACCESS ROAD	N, LIMITED PAND ACTIVE BOX Numbers) - 1:	DATE ARTNERSHIP OR OTH WITH THIS OFFICE. 1b.—City, State & Zip Code CHARLOTTE NC 28210	ER BUSINESS ENTIT Registration/ Document Number
agent. I am familiar with, and accept the oblig SIGNATURE (Registered Agent Accepting Appointment A GENERAL PARTNER TH M 11 Name(s) of General Partner(s) - DIXIE MANOR, INC.	Address of Each Geron FAIRVIEW ROAL 106 ACCESS ROAD	N, LIMITED PAND ACTIVE BOX Numbers) - 1:	DATE ARTNERSHIP OR OTH WITH THIS OFFICE. 1b.—City, State & Zip Code CHARLOTTE NC 28210	ER BUSINESS ENTIT Registration/ Document Number

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

Michael Calandra, President