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

LIMITED PARTNERSHIP



FLORIDA DEPARTMENT OF STATE

ANNUAL REPORT 1999	Secretary of State DIVISION OF CORPORATIONS		99 APR 15 AM 9: 21	
1. Name of Limited Partnership	1a. DOCUMENT # A9800002593			
HOLLY INVESTMENTS, LTD.			1 1001021 1018 10181 10111 00111	88 96 8 8 8 8 1108 91 9 18 9 1 1 (89)
Mailing Address 5929 ANNO AVENUE ORLANDO FL 32809	Principal Office Address 5929 ANNO AVENUE ORLANDO FL 32809		3. Date Formed or Registered 11/19/1998 3a. Date of Last Report	5a. Capital Contributions as Shown on record \$10,000.00
2. Malling Address	2a. Principal Office Address		4. State or Country of Formation	Contributions in Ft ORIDA to date
Suite, Apt. #, etc. City & State	Suite, Apt. #, etc. City & State		6. FEI Number 59-3543632	Applied For Not Applicable
Žip Country	Zip Country		7. Certificate of Status Desired	\$8.75 Additional Fee Required State (See reverse side for fee information)
9. Name and Address of Current	Registered Agent	T	10. If changed, new Registered	Agent/Office
BANKSTON, CHESTER W 5929 ANNO AVENUE ORLANDO FL 32809		Name JAMES W. BANKSTON Street Address (P.O. Box Number Is Not Arceptath) 5127 ANNO AUE Suite. Apt #, etc City PLANO FL 32809		
10a. Pursuant to the provisions of sections 620.1051 and for the purpose of changing its registered office or reagent. I am familiar with, and accept the obligations	gistered agent, or both, in the State of Flori	id limited partnership orga	anized or registered under the laws of the	
SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT	is a corporation,	_VVQ/∕Ð√\ LIMITED PAR	DATE RTNERSHIP OR OTHE	4 12 144 ER BUSINESS ENTITY
11. Name(s) of General Partner(s)	BE REGISTERED AN Address of Each General 11a. (Do NOT Use Post Office Box	D ACTIVE W	ITH THIS OFFICE. City, State & Zip Code	11c. Registration/
CHESTER W. BANKSTON, TRUSTEE ALWILDA S. BANKSTON, TRUSTEE	5929 ANNO AVENUE 5929 ANNO AVENUE		ORLANDO FL 32809 ORLANDO FL 32809 717117171737 -04/27 4 6 71	2479676 249-0109603 39.75 ****158.75
Note: General partners MAY NOT 12. I do hereby certify that the information supplied with this from any liability of non-compliance with Section 119.07 is true and accurate and that my signature shall have the execute this report as required by chapter 620, Florida	filing is voluntarily furnished and does not of (3)(k) in the event that the information supplies and legal effects as if made under oath	jualify for the exemption sollied is deemed exempt for I further certify that I am	slated in Section 119.07(3)(k), Florida Sta om public access. I further certify that the	tutes. Trulease the Envision of Corporations information indicated on this annual report.

SIGNATURE PAMES W. DANKSTON Daytine Telephonic Number 407 851-2760