

**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
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 JAN 27 PM 4:01

1. Name of Limited Partnership

1a.

DOCUMENT #

A98000002680

CNL POINT INVESTORS, LTD.

Mailing Address

Principal Office Address

**400 E. SOUTH STREET
ORLANDO, FL 32801**

2. Mailing Address

2a. Principal Office Address

State, Apt. #, etc.

State, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

3. Date Filed For Registration

12/4/98

3a. Date of Last Report

5a. Capital Contributions as
Shown on Record

\$6,500,000.00

5b. Amount of Capital
Contributions to FIDEDDA
to date

\$2,000.00

4. State or Country of Incorporation

FLORIDA

6. FID Number

59-3547100

☐ Applied For
☐ Not Applicable

7. Certificate of Status Received

☒ **\$8.75** Annual
Fee Required

8. Make check payable to: Dept. of State (See reverse side for full information)

9. Name and Address of Current Registered Agent

**Kyle L. WhiteJohnson
400 E. South Street
Orlando, FL 32801**

Name

Street Address (P.O. Box Number, N/A, excepted)

State, Apt. #, etc.

City

FL

Zip Code

10. If changed, New Registered Agent/Office

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

CNL Point Investors, Inc.

400 E. South Street

Orlando, FL 32801

P98000101357

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 and extension of 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, or owner or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

Robert A. Bourne, President

DATE **12/18/98**

Typed or Printed Name of General Partner Signing Form

CNL Point Investors, Inc.,

General Partner
Daytime Telephone Number

(407) 650-1000

CR2E003 (8/98)