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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partner the receiver or trustee empowered to execute this report as required by Chapter 827 Florida Statutes	CITY-ST-ZIP	certify that the information supplied with	this filing does not qualify for the	se exemption stated in	n Section 119.07(3)(i), Florida Statutes. I further certify that the informati		

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MENERAL PARTNER

4/25/00 561-212-566

Daytime Phone #