FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1998

AYTONA PAR 3 PARTNERS, L.P., LTD.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

Name of Limited Partnership

na. DOCUMENT # **B92000000075** FRED SECRETARY OF STATE DIVISION OF CORPORATIONS

97 DEC 10 PN 1:19



3. Date Formod or Registered 12/24/1992 3a. Date of Last Report 12/26/1996 4. State or Country of Formation 5a. Capital Contributions as Shown on record \$1,305,031.00 5b. Amount of Capital Contributions in FLORIDA to date.
DE \$1,318,213.40
6. FEI Number 59-3152595 Applied For Not Applicable
7. Certificate of Status Desired \$8.75 Additional Fee Required 8. Make check payable to: Dept. of State (See reverse side for fee information)
10. If changed, new Registered Agent/Office
Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc12/22/9701020025 City ****633. 2 *****541.25

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.

WIUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.				
11. Name(s) of General Partner(s)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number	
DAYTONA PAR 3, INC.	525 FENTRESS BLVD.	DAYTONA BEACH FL 3211	F9200000980	
R.O.T., L.L.C.	525 FENTRESS BLVD.	DAYTONA BEACH FL 3211	G93047900019	
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Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

2. 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 trusted empowered to execute this page as required by chapter 620, Florida Statutes.

SIGNATURE ____

Typed or Printed Name of General Partner Signing Form

1 1 Vogos Procident

DATE _ 12/5/97