

**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
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1/1/26
99 JAN 15 PM 4:30
TALLAHASSEE, FLORIDA



1. Name of Limited Partnership: CHALLENGER CAPITAL MANAGEMENT, L.P., LIMITED PARTNERSHIP		1a. DOCUMENT # B94000000114
Mailing Address 400 FIFTH AVE. S. SUITE 301 NAPLES FL 34102	Principal Office Address 400 FIFTH AVE. S. SUITE 301 NAPLES FL 34102	
2. Mailing Address 801 LAUREL OAK DRIVE Suite, Apt. #, etc. FIFTH FLOOR City & State Naples, FL. Zip Country 34108 USA	2a. Principal Office Address 801 LAUREL OAK DRIVE Suite, Apt. #, etc. FIFTH FLOOR City & State Naples FL Zip Country 34108 USA	

3. Date Formed or Registered 03/29/1994 3a. Date of Last Report 12/31/1997 4. State or Country of Formation DE 6. FEI Number 62-1512092 7. Certificate of Status Desired ☐ \$8.75 Additional Fee Required 8. Main check payable to: Dept. of State (See reverse side for fee information)	5a. Capital Contributions as Shown on record \$62,500.00 5b. Amount of Capital Contributions in FL OR DA to date: ☐ Applied For ☐ Not Applicable
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9. Name and Address of Current Registered Agent LJH GLOBAL INVESTMENTS L.L.C. 400 FIFTH AVE. S. SUITE 301 NAPLES FL 34102	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) 801 LAUREL OAK DRIVE Suite, Apt. #, etc. FIFTH FLOOR City Naples FL Zip Code 34108
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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 _____

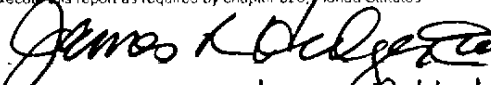
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name(s) of General Partner(s) LJH GLOBAL INVESTMENTS, L.L.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 400 5TH AVE. S. 801 Laurel Oak Drive Fifth Floor	11b. City, State & Zip Code 34108 NAPLES FL 34102	11c. Registration Document Number M94000000018
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Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

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)(b), 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 execute this report as required by chapter 620, Florida Statutes.

SIGNATURE  Typed or Printed Name of General Partner Signing Form James R. Hedges, IV	DATE 12/31/98 Daytime Telephone Number (941) 593-5000
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CP2E003 (8/98)