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

LIMITED PARTNERSHIP ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

98 JAN 12 PM 12: 09

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ER RESOURCES LIMIT	TED PARTNERSHIP		1 1001/01 1810 18101 811/1 881/1	<b>iain da</b> n bank.		
			001/21			
Malting Address	Principal Office Address	-	3. Date Formed or Registered	5a. Capit Show	al Contributions as n on record.	
50 HERNDON PKWY. TE. 200	850 HERNDON PKWY. STE. 200		02/22/1995 38. Date of Last Report		\$990.00	
ERNDON VA 22070	HERNDON VA 22070		01/06/1997  4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:		
2. Mailing Address	2a. Principal Office Address	28. Principal Office Address		990		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		Applied For		
City & State	City & State		<b>54-1752367 7.</b> Certificate of Status Desired		Not Applicable	
Zip Country	Zip	Country	8. Make check payable to: Dept. o	f State (See rev	\$8.75 Additional Fee Required erse side for fee information	
9. Name and Address of Current Registered Agent		Name	10. If changed, new Registered Agent/Office			
HOLLOWELL, RICHARD 927 CLINT MOORE ROAD			D. Box Number Is Not Acceptable)		· · · · · · · · · · · · · · · · · · ·	
		1				
BOCA RATON FL 33487		Suite, Apt #, etc.		<u> </u>		
BOCA RATON FL 33487		City	VF	FL	Zip Code	
BOCA RATON FL 33487  Oa. Pursuant to the provisions of section for the purpose of changing its regis agent. I am familiar with, and accept IGNATURE (Registered Agent Accepting Ap	is 620,1051 and 620,192, Florida Statutes, the above-na stered office or registered agent, or both, in the State of I the obligations of section 620,192, Florida Statutes. opointment).  R THAT IS A CORPORATION, MUST BE REGISTERED A	City med limited partnership of Florida. Such change was	DATE  RTNERSHIP OR OTHE	the State of Flor reby accept the	da, submits this statement appointment of registered	
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BOCA RATON FL 33487  108. Pursuant to the provisions of section for the purpose of changing its regis agent. I am familiar with, and accept BIGNATURE (Registered Agent Accepting APA GENERAL PARTNE)  1. Name(s) of General Partner(s)  RER NEW RESOURCES, INC.	pointment)  R THAT IS A CORPORATION, MUST BE REGISTERED A  Address of Each Gen  (Do NOT Use Post Office	City  med limited partnership of Florida. Such change was   LIMITED PAI  ND ACTIVE W  eral Partner  Box Numbers)  ST H	DATE RTNERSHIP OR OTHE VITH THIS OFFICE.  City, State & Zip Code  DERNIDON VA 22070  DERNIDON VA 22070  DERNIDON VA 22070	the State of Flor reby accept the R BUSI 11c. F95 4 10 9 9 7 98 — 01	NESS ENTITY  Registration/ Document Number  000000883  569-66 125-016  ****156.25	

empayered to execute this report as required by chapter 620, Florida Statutes.

Typed or Printed Name of General Partner Signing Form REP NEW POSOURCES INC. It's Committee Telephone Number