FLORIDA DEPARTMENT OF STATE CONTROL OF STATE C

Typed or Printed Name of General Partner Signing Form Thomas E. Newton, Pregident

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

97 MAY -5 AM 9: 30

334/365-9058

Telephone Number __

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1. Name of Limited Partner	ļ]					
59 WEST PAR	TNERS, LTD.										
	,,			DO NOT WRITE IN THIS SPACE.							
2. Mailing Address			A Date Formed or Registered								
P. O. BOX 6	80176	3. Principal Office Address 250 Washington Street				4. Date Formed or Registered to Do Business in Florida 6/2/95					
Suite, Apt. #, etc		Suite, Apt. #, etc.	5	5, FEI Number				Applied For			
City & State	41-1	City & State				63-1142753				Not Applicable	
Prattville,	Prattville,			6. CERTIFICATE OF STATUS DESIRED 5 Section Additional For trapport							
36068	Country Autauga			auga	 7	7. State or Country of Formation A			labama		
8a. Capital Contributions on Record	as Shown	FEES:1.) Filing Fee(s): Corrouted at a rate of \$7 per \$1.				amount and				and a maximum of	
\$1,000,00	i	\$437.50,	\$437.50, for each year size this office.								
8b. Amount of Capital Co				al Fee(s): \$103.75 for <u>each year due</u> this office, beginning with 1992 calendar year. (s): \$500 penalty fee for <u>each year report form is delinquent.</u>							
FLORIDA to date: Note: If the amount entered in 8b is greater than amount entered in 8a, a supplemental affidavit must be submitted along with a separate an appropriate filing fee.									a separate and		
9. 1	Name and Address of Current Re	egistered Agent		<u> </u>		10. If cha	nged, new registered a	gent/office			
Roland W. K	lehn. Esa			Name							
	ding, Hughes, F	`ite		Street Address (P.O. Box Number is Not Acceptable)							
Bassett &			Suite, Apt. #, etc05/09/9/9								
220 McKenzi			<u> </u>			seesecti ot esesciti de					
Panama City	, FL 32401			City FL Zip Code							
for the purpose of cl	108. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited pertnership 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.										
DIONATURE (D							D475				
	A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY										
A GENETIAL I	MUST	BE REGISTERI	ED ANI	D ACTIV	VE WITH	THIS O	FFICE.	- DQ 011	1200		
11. Names of Genera	Names of General Partner(s) Address of Each General Pi (Do NOT Use Post Office Box N							11a.		ent Number	
Corporate G	Corporate General, Inc. 250 Washing			treet	Pratty	attville, AL 36067			F92-595		
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				RE			INSTATEMENT 97 QC 5-6				
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	artners MAY NOT I							<u> </u>			
12. I do hereby certify that the information supplied with this filling 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 lability 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 820, Florida Statutes. Corporate General, Inc.											
-	•			4	-30-9	7	1				
SIGNATURE			<i>J.</i> Y.'			 	DATE				