FLORIDA DEPARTMENT OF STATE

				11.60	1 5 0 1	
DOCUMENT # B9500000046	2					
Name of Limited Partnership		,				
Windcrest/Parkside I, Ltd	•					
				DO NOT WRITE	IN THIS SPACE.	
2. Mailing Address	3. Principal Office Address		4, Date Formed or	Registered		
390 N. Orange Ave.	950 N. Orlando A	To Do Business in Florida 12/19/95				
Suite, Apt #. etc Ste. 1100	Suite, Apt. #, etc. Ste. 320		5. FEI Number			Applied For
City & State Orlando, FL	City & State Winter Park, FL			7 <i>L-0487933</i> Not Applicable		
Zip Country	Zip Country USA		6. CERTIFICATE OF STATUS DESIRED X 86.75 Assisting, of Certificate of Status 7. State or Country of Formation Texas			
32801 USA						
8a. Capital Contributions as Shown on Record	FEES: (1.) Filing Fee(s): Comput	ad at a rate of \$7 per \$	1,000 on amount entered in			d a maximum of
.⊙.∞	\$437.50, for each yes	r due this office.	due this office, beginning wit		-	
8b. Amount of Capital Contributions in FLORIDA to date:	3.) Penalty Fee(s): \$500	penalty fee for <u>each</u> <u>ye</u>	ar report form is delinquent.			
D.co	Note: If the amount entered in 8b is appropriate filing fee.	S Overster snan amount (antered #i Ba, a supplements	n mundahu unan da	ELIDITITES STORY WITH B	aeparate and
9. Name and Address of Current R	egletered Agent		10. If changed,	new registered a	gent/office	
B&C Corporate Services of Ce	ntrel Floride	Name				
Inc.	Street Address (P.O. Box Number Is Not Acceptable)					
390 N. Orange Ave., Ste. 110	Suite, Apt. W, etc.					
Orlando, FL 32801						
		City			FL Zip Code	
10a. Pursuant to the provisions of sections 620.1051 and 6 for the purpose of changing its registered office or regagent. I am familiar with, and accept the obligations of SIGNATURE (Registered Agent Accepting Appointment)	gistered agent, or both, in the State of Flor if section 620 192, Florida Statutes.	ida. Such change was	authorized by its general pa	ariner(s). I hereby	accept the appointmen	t of registered
A GENERAL PARTNER THAT IS MUST	BE REGISTERED AN	D ACTIVE W				
11. Names of General Partner(s)	Address of Each General Pa (Do NOT Use Post Office Box N		City, State and Zip C	ode		tration nt Number
Windcrest/Parkside II, Inc.	950 N. Orlando Ar Ste. 320	ve. Win	ter Park, FL	32789	P950003	5403
	Windson to be the	Prince	P OI Versione in the case of	^	1-1	İ
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			200	-05/28/3 ****669	92892 9701030- .00 ****	-012 65.00
Note: General partners MAY NOT I	be changed on this form	ı; an amendn	nent must be file	ed to chan	ge a general :	partner.
12. I do hereby certify that the information supplied with the Corporations from any liability of non-compliance with S	filing is voluntarily furnished and does no ection 119.07(3)(k) in the event that the in	t qualify for the exemp	tion stated in Section 119.07 semed exempt from public	7(3)(k), Florida Sta	atutes. I release the Divi	sion of on indicated on

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)(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 truster
•.	empowered to executorisis report as coolured by chapter 620, Fiorida Statutes.
•	% / / / / / / / / / / / / / / / / / / /

Preston Perrone, Vice President
Typed or Printed Name of General Parlner Signing Form Windcrest/Parkside 'II, Inc.

Telephone Number <u>(407) 628-4544</u>

CR2E039 (1/97)