## EILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP

WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE FLORIDA DEPARTMENT OF STATE LIMITED PARTNERSHIP Sandra B. Mortham FILED ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 98 DEC 31 AM 10: 15 **DOCUMENT#** 1. Name of Limited Partnership SECRETARY OF STATE B96000000131 TALLAMASSEE, FLORIDA IG ASHFORD REGENCY PARTNERS, LIMITED PARTNERSHIP 3. Date Formed or Registered Capital Contributions as Shown on record. Mailing Address Principal Office Address 04/19/1996 1226 COMMERCE STREET, SUITE 300 1226 COMMERCE STREET, SUITE 300 \$990.00 DALLAS TX 75202-4328 DALLAS TX 75202-4328 3a. Date of Last Report 12/29/1997 5b. Amount of Capital Contributions in FLORIDA to date: 4. State or Country of Formation 2. Mailing Addres Principal Office Address 00,00 10190 N. Central Expressivery 10670 N. Central NV Suite, Apt. #, etc. 6. FEI Number ute 600 suite 600 Applied For 13-3801027 Not Applicable TX 7. Certificate of Status Desired \$8.75 Additional Fee Required Country USA 8 Make check payable to: Dept. of State (See reverse side for fee information) USA 9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office Cornoration Sustem PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET Rozal TALLAHASSEE FL 32301 Plantation 10a. Pursuant to the provisions of sections 620.1051 and 620.1052, 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 Terri Atteberry Assistant Secretary ىي <del>كئنگ</del>ى SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION. LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE 11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) Registration/ 11. City, State & Zip Code 11c. Name(s) of General Partner(s) Document Number -IG-CAPITAL-III-ASSOCIATES, I 4226 COMMERCE STREET, -DALLAS TX-75202-4328 -P96000015243-10690 N. Central Exply AKT Floridz Portnes I, Iuc. FA80000022977 Nalles TX 75231 Guite 600 100002735531--1 -01/11/99--01002--033 \*\*\*\*141.25 \*\*\*\*141.25

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)(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 trustee emplywered to execute this report as required by chapter 620, Florida Statutes.

ART Ploride Portners I Typed or Printed Name of General Partner Signing Form

SIGNATURE

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