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

1. Name of Limited Partnership

na. DOCUMENT # B96000000203 FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

98 SEP 18 ANTI: 15

800 E 2ND STREET SCOTTSDALE AZ 85251 2. Malling Address 3. Man and Address of Country 2. Malling Address 3. Man and Address of Country 4. State 7. Conflictate of Salus Desired 8. Man and Address of Salus Desired 9. Name and Address of Country 3. Man and Address of Country 4. State 7. Conflictate of Salus Desired 9. Name and Address of Country 8. Man and Address of Country 9. Name and Address of Country 10. If changed, new Registered Agent Office 10. If changed, new Registered Agent Office or imposition of the Solution Salus Office or imposition of the Solution Salus Office or imposition of the Solution Salus Office	PREFERRED RESORT MAIN (PARTNERSHIP	GATE, L.P., LIMITED					
2. Mailing Address 2. Principal Office Address Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Country Zip Country Zip Country Zip Country Zip Country Zip Country Tochilidate of Status, Desired Feet Registered Agent Country 9, Name and Address of Current Registered Agent To. Gettindate of Status, Desired Feet Registered Agent Country 9, Name and Address of Current Registered Agent To. If charged, new Registered Agent/Office CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Suite, Apt. #, etc. City FL Zip Country Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Country FL Zip Coun		6900 E. 2ND STREET			06/06/1996 3a. Date of Last Report 12/31/1997	\$2,537,568.00 5b. Amount of Capital Contributions InFLORIDA to date:	
City & State Country					DE		
Experience of the provisions of sections 620.192. Florida Statules, the above-named imited partnership organized or registered under the laws of the Signer Agent Agent FL 200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 10a. Pursuant to the provisions of sections 620.192. Florida Statules, the above-named limited partnership organized or registered under the laws of the Statules, the above-named limited partnership organized or registered under the laws of the Statules and the for the purpose of changing its registered office or registered agent, to both, in the Statules. Such change was authorized by its general partner(s). I hereby secopit the appointment of Agistered agent, and familiar with, and except the delipations of section 620.192. Florida Statules. 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. 11. Name(s) of General Partner(s) 11a. (Address of Each General Partner(s) 11b. City, State 6 2p Code 11c. Document Number PREFERRED RESORT MAIN GATE, 6900 E. 2ND STREET SCOTTSDALE AZ 85251 F960000002842 Note: General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner.					93-1209234		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 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 Statio of Florida, submiss fundament for the purpose of changing its registered differe or registered agent, or both, in the Statio of Florida. Such change was authorized by its general partner(s). I horeby accept the appointment of Agistered agent and accept the obligations of section 520.192, Florida Statutes. 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. 11. Name(s) of General Partner(s) 12. General Partner(s) 13. (b) NOT Use Post Office Box Numbers 14. (c) NOT Use Post Office Box Numbers 15. COTTSDALE AZ 85251 F960000002842 Note: General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner.	Zip Country	Zip	Country		Fee Required		
Sirest Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Cogno The State of Fiolds, submits finisy statement of Mightered dispersed partner of Mightered agent to ficide. Such change was authorized by its general partner(s). I hereby accept the supprintment of Mightered agent to ficide. Such change was authorized by its general partner(s). I hereby accept the supprintment of Mightered agent. I man authorized by its general partner of Mightered agent. I man authorized by its general partner of Mightered agent. I man authorized by its general partner of Mightered agent. I man authorized by its general partner of Mightered agent. I man authorized by its general partner of Mightered agent. I man authorized by its general partner of Mightered agent. I man authorized by its general partner of Mightered agent. I man authorized by its general partner of Mightered agent. I man authorized by its general partner of Mightered agent. I man authorized by i	9. Name and Address of Current Registered Agent			10, If changed, new Registered Agent/Office			
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 Pertner(s) 11a. (Do NOT Use Post Office Box Numbers) PREFERRED RESORT MAIN GATE, 6900 E. 2ND STREET SCOTTSDALE AZ 85251 F96000002842 P097/22/18801021005 ****1623.45 *****141.25	1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 10a, Pursuant to the provisions of sections 620.1051 a for the purpose of changing its registered office o agent. I am familiar with, and accept the obligation	r registered agent, or both, in the State of Floi ns of section 620.192, Florida Statutes.	Suite, Apl. City	#, etc.	ed or registered under the laws of the zed by its general partner(s). I hereb	State of Flori	de, submits this determent
PREFERRED RESORT MAIN GATE, 6900 E. 2ND STREET SCOTTSDALE AZ 85251 F96000002842 PREFERRED RESORT MAIN GATE, 6900 E. 2ND STREET SCOTTSDALE AZ 85251 F96000002842 SOURCE STREET SCOTTSDALE AZ 85251 F96000002842 AS SESSOR WAYNOT BE Changed on this form; an amendment must be filed to change a general partner.	A GENERAL PARTNER THA	T IS A CORPORATION,	LIMITED ID ACTIV	PARTN VE WITH	NERSHIP OR OTHE	R BUSI	NESS ENTITY
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	PREFERRED RESORT MAIN GATE,			SCOT	900 <u>0</u> 02	645	6690
19 Lide harehy cartify that the information supplied with this filing is valuntarily furnished and does not qualify for the examption stated in Section 119.07(3)///). Florida Statutes Traisage the Division of							

Corporations from any liability of non-compliance with Section 118.07(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 entapter 620, Florida Statutes.

Petri Add for Preferred Blant Main. Davine Telephone Number 402-874-0706