FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIF
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

COC W	Similar of 80	0.0	98 NEC 1	1 -	
1. Name of Limited Partnership	1a. DOCUMENT # B96000000473			4 PM12: 43	
CRESTVIEW MOTEL, LTD.					
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as	
P.O. BOX 5566 DOTHAN AL 36302	2733 ROSS CLARK CIRCLE DOTHAN AL 36301		12/10/1996 3a. Date of Last Report 12/09/1997	\$0.00 5b. Amount of Capital Contributions in FLORIDA to date:	
2 16-16- Add	Ža. Principal Office Address		4. State or Country of Formation	to date:	
2. Mailing Address	Za. Principal Onice Address		AL		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 59-2298679	Applied For Not Applicable	
City & State	City & State		7. Certificate of Status Desired	\$8.75 Additional	
Zlp Country	Zip (Country	8. Make check payable to: Dept. of S	Fee Required Itate (See reverse side for fee information)	
0 11 12 12			10 (6-1	A 4/0/10	
9, Name and Address of Current Registered Agent 10. If changed, new Register			IU. If changed, new Registered	Agent/Office	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD	Street Address (P.O. Bo		O. Box Number Is Not Acceptable)		
PLANTATION FL 33324	Suite, Apt. #, etc.				
		City		FL Zip Code	
Pursuant to the provisions of sections 620.1951 and 620.192, 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.					
SIGNATURE (Registered Agent Accepting Appointment)	A CODDODATION I	MITED DA	DTMCDCUD OD OTHE	D DUCINECC ENTITY	
A GENERAL PARTNER THAT IS MUST I	BE REGISTERED AND	ACTIVE V	NITH THIS OFFICE.	R BUSINESS ENTITY	
11. Name(s) of General Partner(s)	11a. Address of Each General	Partner Numbers) 111	City, State & Zip Code	11c. Registration/ Document Number	
CRESTVIEW MOTEL, INC.	3500 EASTERN BLVD.	ĺ	MONTGOMERY AL 36116	F9600006444	
LHR CRESTVIEW, INC.	273 ROSS CLARK CIRCL		DOTHAN AL 36301	F96000006348	
			4000027 -12/24/3 ****14	213541 9801003014 1 25 ****141.25	

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

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

SIGNATURE
~ · · · · · · · · ·

Typed or Printed Name of General Partner Signing Form