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

SIGNATURE 社

Typed or Printed Name of General Partner Signing Form

FLORIDA DEPARTMENT OF STATE FILED SECRETARY OF STATE DIVISION OF CORPORATIONS LIMITED PARTNERSHIP Sandra B. Mortham ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 98 NOV 18 PM 12: 48 **DOCUMENT#** 1. Name of Limited Partnership # 11/20 B9700000174 WAVERLY DEVELOPMENT GROUP, L.P. 3. Date Formed or Registered Capital Contributions as Shown on record. Mailing Address Principal Office Address 04/11/1997 C/O ROBERT M. SCHIFFMAN C/O ROBERT M. SCHIFFMAN -\$1,900,000,00 1430 WYNNTON ROAD 1430 WYNNTON ROAD 3a. Date of Last Report COLUMBUS OH 31906 COLUMBUS QH731906 12/22/1997 5b. Amount of Capital Contributions in FLORIDA GA 6A-4. State or Country of Formation 2. Mailing Address 2a. Principal Office Address GΑ Suite, Apt. #, etc. Suite, Apt. #, etc. 6. FEI Number Applied For Not Applicable 58-2347789 City & State City & State 7. Certificate of Status Desired \$8.75 Additional Fee Required Zip Zip Country Country 8. Make check payable to: Dept. of State (See reverse side for fee information) 9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office Name TARKOW, STANLEY A Street Address (P.O. Box Number Is Not Acceptable) 511 BAY ST., STE. 410 Suite, Apt, #, etc. **TAMPA FL 33606** City 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 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 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. 11b. City, State & Zip Code 11c. Name(s) of General Partner(s) Document Number W DEVELOPMENT GROUP, LLC 1430 WYNNTON ROAD COLUMBUS GA 31906 M97000000180 100002695991--5 -11/24/88--01099--011 \*\*\*\*\*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 filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Floride 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 empowered to execute this report as required by chapter 620, Florida Statutes. Stanley A. Torken Dayline Telephone Number \$127.75 Len

Daytime Telephone Number 8 (3 25 8 887