

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

98 DEC 29 PM 2:51

1. Name of Limited Partnership

1a. DOCUMENT #  
B97000000324

WINDCREST/CROSSING I, LTD.



Mailing Address

C/O B&C CORPORATE SERVICES OF CENT. FLA.  
390 NORTH ORANGE AVE., STE. 1100  
ORLANDO FL 32801

Principal Office Address

100 CONGRESS AVE., STE. 1010  
AUSTIN TX 78701

3. Date Formed or Registered

06/25/1997

5a. Capital Contributions as  
Shown on record.

\$0.00

3a. Date of Last Report

01/15/1998

5b. Amount of Capital  
Contributions in FLORIDA  
to date:

2. Mailing Address

2a. Principal Office Address

98 San Jacinto Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Ste. 710

City & State

City & State

Austin, TX

Zip

Country

Zip

Country

78701

USA

4. State or Country of Formation

TX

6. FEI Number

59-3452994

☐ Applied For  
☐ Not Applicable

7. Certificate of Status Desired

☒ \$8.75 Additional  
Fee Required

8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent

B&C CORPORATE SERVICES OF CENT. FLA., INC.  
390 N. ORANGE AVE., STE. 1100  
ORLANDO FL 32801

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number Is Not Acceptable)

Suite, Apt. #, etc.

City

FL

Zip Code

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)

DATE

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  
(Do NOT Use Post Office Box Numbers)

11b. City, State & Zip Code

11c. Registration/  
Document Number

WINDCREST/CROSSING II, INC.

950 N. ORLANDO AVE.,  
98 San Jacinto  
Blvd.,  
Suite 710

WINTER PARK FL 32789  
Austin, TX  
78731

P97000054185

8000002726948-1  
-12/30/98-01082-020  
\*\*\*\*150.00 \*\*\*\*150.00

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

SIGNATURE

DATE

12-18-98

Typed or Printed Name of General Partner Signing Form

Robert M. Bobinovich, President

Daytime Telephone Number

521493-3000