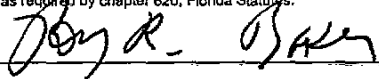


FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
1. Name of Limited Partnership MIAMI AIRPORT SUMMERFIELD ASSOCIATES, L.P.		1a. DOCUMENT # B98000000068	
Mailing Address 8100 EAST 22ND ST. NORTH. BLDG. 500 WICHITA KS 67226		Principal Office Address 8100 EAST 22ND ST. NORTH. BLDG. 500 WICHITA KS 67226	
2. Mailing Address Suite, Apt. #, etc. City & State Zip Country		2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country	
3. Date Formed or Registered 01/28/1998		5a. Capital Contributions as Shown on record. \$4,720,000.00	
3a. Date of Last Report None		5b. Amount of Capital Contributions in FLORIDA to date: 0.00	
4. State or Country of Formation KS		6. FEI Number 74-2855514	
7. Certificate of Status Desired		☐ Applied For ☐ Not Applicable	
8. Make check payable to: Dept. of State (See reverse side for fee information)		8.75 Additional Fee Required	
9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		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) MIAMI AIRPORT SUMMERFIELD CO	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 8100 EAST 22ND ST. NO RTH BLDG 500	11b. City, State & Zip Code WICHITA KS 67226	11c. Registration/Document Number F98000000502
300002698733--8 -11/17/98-01002-003 ***526.25 ***526.25 AL NOV - 9 1998			
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 11/20/98			
Typed or Printed Name of General Partner Signing Form Roy R. Baker SR VP of Finance Daytime Telephone Number 316-681-5107			

FILED

98 NOV -9 AM 9:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CR2E003 (8/98)