


FILE ON OR BEFORE APRIL 7, 1999 TO AVOID
REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
1. Name of Limited Partnership LBVKS, L.P.		1a. DOCUMENT # B98000000123	
Mailing Address 512 MAIN STREET, 14TH FLOOR FORT WORTH TX 76102		Principal Office Address 512 MAIN STREET, 14TH FLOOR FORT WORTH TX 76102	
2. Mailing Address 512 Main Street Suite, Apt. #, etc. 13th Floor City & State Fort Worth, Texas Zip Country 76102 USA		2a. Principal Office Address 512 Main Street Suite, Apt. #, etc. 13th Floor City & State Fort Worth, Texas Zip Country 76102 USA	
3. Date Formed or Registered 02/26/1998		3a. Date of Last Report	
4. State or Country of Formation TX		5a. Capital Contributions \$6,346,000 5b. Amount of Capital Contributions in FLORIDA to date	
6. FEI Number 75-2464992		7. Certificate of Status Desired Applied For Not Applicable	
8. Make check payable to Dept. of State (See reverse side for fee information)		9. Name and Address of Current Registered Agent 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 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.		10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code	
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) LBVKS MANAGEMENT COMPANY, IN	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 512 MAIN STREET, 14TH 13th fl	11b. City, State & Zip Code FORT WORTH TX 76102	11c. Registration/ Document Number F98000001121
200002848482-1 04/22/99 -01121-005 ****526.25 ****526.25			
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 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 Typed or Printed Name of General Partner Signing Form		DATE 4/14/99 Daytime Telephone Number 817 3326400	

CR2E003 (12/98)