

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
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FILED
98 DEC 31 PM 2:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name of Limited Partnership	1a. DOCUMENT # B98000000276
LA BENDICION LIMITED PARTNERSHIP	



Mailing Address 4510 OLD FIELD DRIVE GAINESVILLE VA 22065	Principal Office Address 4510 OLD FIELD DRIVE GAINESVILLE VA 22065	3. Date Formed or Registered 04/29/1998	5a. Capital Contributions as Shown on record. \$7,500.00
2. Mailing Address 4510 Old Field Rd.	2a. Principal Office Address 4510 Old Field Rd.	3a. Date of Last Report	5b. Amount of Capital Contributions in FLORIDA to date:
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. State or Country of Formation GA	
City & State Gainesville, VA	City & State Gainesville, VA.	6. FEI Number 54-1899641	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip 20155	Zip 20155	7. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
		8. Make check payable to: Dept. of State (See reverse side for fee information) 141.25	

9. Name and Address of Current Registered Agent UNDERWOOD, ROBERT L 537 EAST PARK AVENUE TALLAHASSEE FL 32301	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. 400002747174-3 City ***141.25 FL ***141.25
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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
LA BENDICION GP, INC.	4510 OLD FIELD DRIVE Road	GAINESVILLE VA 22065 20155	F98000002429

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 James W. Dick DATE 12/26/98
 Typed or Printed Name of General Partner Signing Form James W. Dick Daytime Telephone Number 703-754-9756

CR2E003 (8/98)