## FILÉ 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

SIGNATURE

1a. DOCUMENT # B98000000292 SECRETARY OF STATE DIVISION OF CORPORATIONS

98 SEP 25 AM 10: 05

LYNN HAVEN PARTNERS, LTD.			
Mailing Address 250 WASHINGTON STREET	Principal Office Address 250 WASHINGTON STREET	3. Date Formed or Registered 05/04/1998	5a. Capital Contributions as Shown on record.
PRATTVILLE AL 36067	PRATTVILLE AL 36067	3a. Date of Last Report      4. State or Country of Formation	S. A. F. (ed. G.) 5-98  5b. Amount of Capital Contributions in FLORIDA to date:
2. Malling Address D. O. Box 680176	2a. Principal Office Address	AL	
Suite, Apt. #, etc.	Suite, Apt. #, etc.  City & State	6. FEI Number	Applied For Not Applicable
Prattuille, AL	Ony a orang	7. Certificate of Status Desired	\$8.75 Additional
36068 Country USA	Zip Country		Fee Required late (See reverse side for fee information)
9, Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office			Acenti Office
Name		res.u.o.	
KIEHN, ROLAND W 220 MCKENZIE AVENUE	Over Address /		17-9141,25
PANAMA CITY FL 32401	Suite, Apl	# etc.	
1794(diki 01)   E 0210			
	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. Clty, State & Zip Code	11c. Registration/ Document Number
CORPORATE GENERAL, INC.	250 WASHINGTON STREET	PRATTVILLE AL 36067	F9200000595
		6000026 -09/25/ ****14	3801057003
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Note: General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner.

12. Ido 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), Fiorida Statutes. I release the Division of

Tromas F. Nowston

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 520, Florida Statutes.