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

LIMITED PARTNERSHIP ANNUAL REPORT 1999

Typed or Printed Name of General Partner Signing Form



FLORIDA DEPARTMENT OF STATE

San ra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT#

FILED 98 OCT 14 FM 1: 17

SECRETARY OF STATE TALLAHASSEE, FLORIDA

1		40 I					
GLEN ELLEN MOBILE HOME PA	ARK, L.P. Qq	-ARM					
Mailing Address	Principal Office Address			3. Date Formed or Registered	5a. Capital Contributions as Shown on record.		
2882 GULF TO BAY BOULEVARD (ROUTE 60) CLEARWATER FL 33759	·		-	07/13/1998 3a. Date of Last Report \$660			
				_	5b. Amount of Capital Contributions in F	ORIDA	
2. Mailing Address	2a. Principal Office Address			4. State or Country of Formation	to date:		
2-9605 US 19 N # Suite, Apt. #, etc.				DE 6. FEI Number			
, #-\30 City & State	City & State		'	Applied For Not Applicable			
CLEARWATER FL	City & State		-	7. Certificate of Status Desired \$8.75 Additions Fee Required		Additional	
Zip Country	Zip Country		7	Fee Required 8. Make check payable to: Dept. of State (See reverse side for fee information)			
		1	·	10. If changed, new Registered	Agent/Office		
9. Name and Address of Current Registered Agent		10. If changed, new Registered Agent/Office Name					
CORPORATION SERVICE COMPANY		Street Address (P.O. Box Number is Not Acceptable)					
1201 HAYS STREET TALLAHASSEE FL 32301-2525		Suite, Apt. #, etc.					
.,		City		·	FL Zip Code		
10a. Pursuant to the provisions of sections 620.1051 and 67 for the purpose of changing its registered office or registered. I am familiar with, and accept the obligations of SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS	stered agent, or both, in the State of Fiorid section 620.192, Florida Statutes.	a. Such change	e was authoriz	zed by its general partner(s). I hereby	accept the appointment o	f registered	
11. Name(s) of General Partner(s)	11a. Address of Each General	Dates	11b.	City, State & Zip Code	11c. Regis	ration/ t Number	
DIVERSIFIED INVESTMENTS - GLEN	4340 EAST WEST HIGHWAY		BETHESDA MD 20814		F9800003997 5691579 79801057010		(04:30)
CCLEN, AM	SUNTE 206	-		700002 -10/21 *****	669157 /9801057- 88.75 *****	'——9 -010 88.75	ろしなしつ
		٠,			669157 /8801057- 37.50 ****	-011	
Note: General partners MAY NOT b	e changed on this form	; an ame	endmen	t must be filed to cha	nge a general i	partner.	
12 I do hereby certify that the information supplied with this is Corporations from any liability of non-compliance with Se this annual report is true and accurate and that my signat empowered to execute this report as fequired by chapter	Ming is voluntarily furnished and does not cition 119.07(3)(k) in the event that the infeture shall have the same legal effects as if	qualify for the ex ermation supplie	exemption stated	ted in Section 119.07(3)(k), Florida St exempt from public access. I further	atutes. I release the Division	on of Indicated on	
SIGNATURE /				DATE Q	15.98		

Daytime Telephone Number,