

**FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP  
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP  
ANNUAL REPORT  
**1997**



FLORIDA DEPARTMENT OF STATE  
**Sandra Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

96 DEC 27 AM 11:45

*with 1/6*

1. Name of Limited Partnership

1a. DOCUMENT #  
**A13533**

**MARTIN COLONY LIMITED PARTNERSHIP**



Mailing Address 1101 LANGLEY LANE MC LEAN VA 22101		Principal Office Address 51 COLONY RD. JUPITER FL 33469 US		3. Date Formed or Registered 12/02/1982	5a. Capital Contributions as Shown on record. \$2,000.00
2. Mailing Address		2a. Principal Office Address		3a. Date of Last Report 01/03/1996	5b. Amount of Capital Contributions in FLORIDA to date
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. State or Country of Formation VA	
City & State		City & State		6. FEI Number 54-1215648	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip Country		Zip Country		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)					

9. Name and Address of Current Registered Agent <b>ZARETSKY, RICHARD P 1655 PALM BEACH LAKES BLVD. SUITE 900 W. PALM BEACH FL 33401</b>		10. If changed, new Registered Agent/Office	
		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		Suite, Apt. #, etc.	
		City	Zip Code <b>FL</b>

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
MARTIN, VANA E	1101 LANGLEY LANE	MCLEAN VA	300002050399--2 -01/08/97--01043--004 ****191.25 ****191.25

**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 *Vana E. P.* DATE 12/20/96

CR2E003 (6/96)