

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

FILED

95 DEC 16 AM 11:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Handwritten initials

LIMITED PARTNERSHIP
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra Northam
Secretary of State
DIVISION OF CORPORATIONS



1. Name of Limited Partnership
MEADOWS OF JUPITER, LIMITED

1a. DOCUMENT #
A15182

Mailing Address WALTER J. MACKEY JR. 1601 FORUM PLACE SUITE 805 WEST PALM BEACH OH 33401		Principal Office Address WALTER J. MACKEY JR. 1601 FORUM PLACE SUITE 805 WEST PALM BEACH OH 33401	
2. Mailing Address	2a. Principal Office Address	3. Date Formed or Registered 08/26/1983	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	3a. Date of Last Report 12/29/1995	5a. Capital Contributions as Shown on record. \$2,220,000.00
City & State	City & State	4. State or Country of Formation FL	5b. Amount of Capital Contributions in FLORIDA to date
Zip	Country	6. FEI Number 59-2354169	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
		7. Certificate of Status Desired <input checked="" 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 MACKAY, WALTER J. JR. 772 LAGOON DRIVE NORTH PALM BEACH FL 33480	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. 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. City, State & Zip Code	11c. Registration/ Document Number
ALEX, STEPHEN A. RMF PROPERTIES, INC.	211 SEASPRAY AVE. 1601 FORUM PLACE SUIT	PALM BEACH FL WEST PALM BEACH FL	857747
300002035563--8 -12/20/96--01109--005 ****585.00 ****585.00			

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 BY: *WALTER J. MACKEY JR.* DATE 12/12/96

Typed or Printed Name of General Partner Signing Form: WALTER J. MACKEY JR., PRESIDENT Daytime Telephone Number: 561-684-8511

CR2E003 (6/96)