## FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

1. Name of Limited Partnership

**DOCUMENT #** A17534

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AVILION ASSOCIATES, LTD.			!		
g Address Principal Office Address  PRUDENTIAL DRIVE 800 PRUDENTIAL DRIVE (SONVILLE FL 32207 JACKSONVILLE FL 32207		72/202	3. Date Formed or Registered  07/27/1984  3a. Date of Last Report	5a. Capital Contributions as Shown on record.	
2. Malling Address	2a. Principal Office Address		12/13/1996 4. State or Country of Formation FL	<b>5b.</b> Amount of Capital Contributions in FLORIDA to date:	
Suite, Apt. #, etc. City & State	Suite, Apt. #, etc.  City & State		6. FEI Number 59-2505491	Applied For Not Applicable	
Zip Country	Zip Country		Certificate of Status Desired     Make check payable to: Dept. of	\$8.75 Additional Fee Required  State (See reverse side for fee information	
9, Name and Address of Curren	it Registered Agent		10. If changed, new Registered		
SMITH & HULSEY 225 WATER ST. 1800 FLORIDA NATIONAL BANK TOWER JACKSONVILLE FL 32202		Streel Address (P.O. Box Number Is Not Acceptable)  Suite, Apt. #, etc.  City  FL  Zip Code			
Oa. Pursuant to the provisions of sections 620.1051 an for the purpose of changing its registered office or agent. I am familiar with, and accept the obligation signature (Registered Agent Accepting Appointment).  A GENERAL PARTNER THAT MUS	registered agent, or both, in the State of Fk ns of section 620.192, Florida Statutes	orida. Such chang	pe was authorized by its general partner(s). I here  DATE  PARTNERSHIP OR OTHE	Pby accept the appointment of registered	
1. 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	
PAVILION DEVELOPERS,INC PAL PROPERTIES, INC.	800 PRUDENTIAL DRIVE 800 PRUDENTIAL DRIVE		JACKSONVILLE FL JACKSONVILLE FL 2:0002 -09/26 *****	/9701069017	
1987 V 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				KWM <sup>§</sup>	
Note: General partners MAY NOT  12. Let hereby certify that the information supplied with 1 Corporations from any liability of non-compliance will this annual report is true and accurate and that my significantly according to execute this report as required by the	his filing is voluntarily furnished and does no i Soction 119.07(3)(k) in the event that the in gnature shall have the samo legal effects as	ot qualify for the e nformation supplie If made under oa	xemption stated in Section 119.07(3)(k), Florida section 119.07(3)(k), Florida section public access. I further	Statutes. I release the Division of	

SIGNATURE Semult C Peny, V.P. - Developer, Inc DATE 9/15/97

Typed or Printed Name of General Partner Signing Form Kenneth C. Perry Daytime Telephone Number (904) 202 - 2772