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

1. Name of Limited Partnership

1a. DOCUMENT # **A24552**

576.25

SECRETARY OF STATE DIVISION OF CORPORATIONS

97 APR 9 PM 4: 28

ALMETTO CLUB PROPERTIES LIMITED PARTNERSH			I HEALEN HOLD HOLD HOLD BYING WELL DIGHT OVER 1981 OVER 1981 CHAIN STAIL STAIL			
			Ch	4	19	97
Vailing Address	Principal Office Address		3. Date Formed or Regin	stered 5	Capita Shown	Contributions as on record.
890 S. PLEASANTBURG DR.	880 S. PLEASANTBURG DR.	•	05/21/1987		\$1,2	262,798.00
P. O. BOX 2324 Greenville SC 29602	P. O. BOX 2324 Greenville SC 29602		3a. Date of Last Report			
			04/11/1996	5	b. Amour Contrib	nt of Capital outions in FLORIDA ::
2. Mailing Address	2a. Principal Office Address		4. State or Country of Fo	rmation	to date	1:
		<u>'</u>		SC 1,262,798		2,798
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 59-0845264			Applied For Not Applicable
City & State	City & State		7. Certificate of Status D	looked.		
Zip Country	Zip	Country			u	\$8.75 Additional Fee Regulred
			B. Make check payable	to: Dept. of State	e (See reve	rse side for fee Informatio
9. Name and Address of C	Current Registered Agent		10. If changed, nev	v Registered Ag	ent/Office	
PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS ST SUITE 105 TALLAHASSEE FL 32301		Name				
		Street Address (P.O. Box Number Is Not Acceptable)				
		Suite, Apt. #, etc.				
		City FL Zip Code			Ziρ Code	
for the purpose of changing its registered o agent I am familiar with, and accept the ob	1051 and 620 192. Florida Statutes, the above- office or registered agent, or both, in the State of organisms of section 620.192, Florida Statutes.			ner(s) Thereby s	ate of Florid	
for the purpose of changing its registered o agent. I am familiar with, and accept the ob SIGNATURE (Registered Agent Accepting Appointm	office or registered agent, or both, in the State of organisms of section 620, 192, Florida Statutes.	of Florida. Such change w	as authorized by its general partr	ner(s) I hereby s	ate of Florid accept the	appointment of registered
for the purpose of changing its registered o agent I am familiar with, and accept the ob	office or registered agent, or both, in the State of organisms of section 620, 192, Florida Statutes.	of Florida. Such change with the state of th	ARTNERSHIP OR WITH THIS OFFICE	DATE OTHER E	ate of Florid accept the	appointment of registered
for the purpose of changing its registered of agent. I am familiar with, and accept the ob- SIGNATURE (Registered Agent Accepting Appointm A GENERAL PARTNER TI	office or registered agent, or both, in the State of pations of section 620, 192, Florida Statutes. HAT IS A CORPORATION MUST BE REGISTERED A	N, LIMITED PA AND ACTIVE V Jeneral Partner Jice Box Numbers) 11	RTNERSHIP OR WITH THIS OFFIC b. City, State & Zip Cod	DATEOTHER DE.	BUSII	NESS ENTITY Registration/ Document Number
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for the purpose of changing its registered of agent 1 am familiar with, and accept the ob- SIGNATURE (Registered Agent Accepting Appointm A GENERAL PARTNER TI- Name(s) of General Partner(s) TUCK, N. BARTON, JR. Note: General partners MAY 12. I do hereby certify that the information supplic Corporations from any liability of non-complia	NOT be changed on this fied with this filing is voluntarily furnished and do not with Section 119 07(3)(k) in the event that at my signature shall have the same legal effect.	OF Florida. Such change with the state of th	RTNERSHIP OR WITH THIS OFFIC b. City, State & Zip Cod GREENMILE SC 29804 4 0 0 0	DATE	BUSII 11c. 4 C) 27 0: 25	NESS ENTITY Registration/ Document Number 734 7 7 1091 - 007 ****541.25
for the purpose of changing its registered of agent. I am familiar with, and accept the observed Agent Accepting Appointmass A GENERAL PARTNER THE NOTICE (Registered Agent Accepting Appointmass A GENERAL PARTNER THE NOTICE) of General Partner(s). TUCK, N. BARTON, JR. Note: General partners MAY 12. I do hereby certify that the information supplies Corporations from any liability of non-compliative annual report is true and accurate and the	NOT be changed on this fied with this filing is voluntarily furnished and do not with Section 119 07(3)(k) in the event that at my signature shall have the same legal effect.	OF Florida. Such change with the state of th	RTNERSHIP OR WITH THIS OFFIC b. City, State & Zip Cod GREENMILE SC 29804 4 0 0 0	DATE	BUSII 11c. 4 C) 27 0: 25	NESS ENTITY Registration/ Document Number 734-7 1091-007 ****541.25