

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

LIMITED PARTNERSHIP  
ANNUAL REPORT  
**1998**



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
97 NOV 20 AM 10:13

1. Name of Limited Partnership

1a. DOCUMENT #  
**A28440**

**ROYAL PALM CENTER ASSOCIATES, LTD.**



Mailing Address

4415 FIFTH AVENUE  
PITTSBURGH PA 15213

Principal Office Address

4415 FIFTH AVENUE  
PITTSBURGH PA 15213

3. Date Formed or Registered

06/06/1989

5a. Capital Contributions as Shown on record

\$655,750.00

3a. Date of Last Report

12/02/1996

5b. Amount of Capital Contributions in FLORIDA to date:

0.00

4. State or Country of Formation

FL

6. FEI Number

59-2963674

Applied For  
 Not Applicable

7. Certificate of Status Desired

\$8.75 Additional Fee Required

8. Make check payable to: Dept. of State (See reverse side for fee information)

2. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

2a. Principal Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

9. Name and Address of Current Registered Agent

ANSBACHER & SCHNEIDER, P.A.  
4215 SOUTHPOINT BLVD.  
#100  
JACKSONVILLE FL 32216

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number Is Not Acceptable)

Suite, Apt. #, etc.

City

500002358345-8

-11/26/97-01097-019

\*\*\*\*165.00 FL \*\*\*\*165.00

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)

WESTCO MANAGEMENT, INC.  
NATIONAL DEVELOPMENT PROPERT

11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)

1520-360 ROYAL PALM S  
4415 FIFTH AVENUE

11b. City, State & Zip Code

FT. MYERS FL  
PITTSBURGH PA 15213

11c. Registration/Document Number

H34759  
J70410

**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

*Diane A. Connor V.P.*

DATE

10-1-97

Typed or Printed Name of General Partner Signing Form

Diane A. Connor V.P.

Daytime Telephone Number

412-578-7800

CR2E003 (6/97)

*KWM/cus*