

**FILE ON OR BEFORE APRIL 9, 1997 TO AVOID REVOCATION
AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra Morham Secretary of State DIVISION OF CORPORATIONS
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 JUL 18 PM 2:20

1. Name of Limited Partnership	1a. DOCUMENT # A94000001272
FIRST DARTMOUTH COMMERCIAL, LTD.	



Mailing Address 6699 90TH AVE. N. PINELLAS PARK FL 34666	Principal Office Address 6699 90TH AVE. N. PINELLAS PARK FL 34666
2. Mailing Address	2a. Principal Office Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country

3. Date Formed or Registered 09/20/1994	5a. Capital Contributions as Shown on record. \$2,088.00
3a. Date of Last Report 01/03/1996	
4. State or Country of Formation FL	5b. Amount of Capital Contributions in FLORIDA to date:
6. FEI Number 59-3269035	<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
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 BREIT, RICHARD H 3111 STIRLING ROAD FORT LAUDERDALE FL 33312
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10. If changed, new Registered Agent/Office
Name MARTIN E. RICE
Street Address (P.O. Box Number Is Not Acceptable) 335 THIRD AVE. N.
Suite, Apt. #, etc. 3rd
City ST PETERSBURG
State FL
Zip Code 33701

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.

DATE **7/16/97**

**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
DARTMOUTH DEVELOPMENT I, INC	5901 SUN BOULEVARD, S	ST. PETERSBURG FL 337	P93000027202
JORGE ECHARTE, JR., INC.	5901 SUN BOULEVARD, S	ST. PETERSBURG FL 337	P94000067463
400002243284--9 -07/21/97--01127--002 *****556.25 *****556.25			
REINSTATEMENT			
300 52.50 103.75			

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	DATE
<i>[Signature]</i> PRESIDENT FRANKS, MARGO, PRESIDENT, DARTMOUTH DEVELOPMENT I	7/30/97
Typed or Printed Name of General Partner Signing Form	Daytime Telephone Number
	813-541-1100

CR2E003 (11/96)