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

1. Name of Limited Partnership

a. DOCUMENT # **A9600000086**

SEMBLER E.D.P. PARTNERSHIP #4, LTD.

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97 DEC 15 PM 1: 20

SECRETARY OF STATE TALLAHASSEE FLORIDA



5a. Capital Contributions as

					0.000	on record.	
5858 CENTRAL AVENUE ST. PETERSBURG FL 33707	5858 CENTRAL AVENUE		01/	11/1996	6400.00		
	ST. PETERSBURG FL 33707			3a. Date of Last Report		\$100.00	
			01/0	07/1997	5b. Amou	nt of Capital butions in FLORIDA	
			4. State	or Country of Formation	Contri to date	butions in FLORIDA e:	
2. Malling Address	2a. Principal Office Addres	28. Principal Office Address		,	\$ 100.00		
Sulte, Apt. #, etc.	Suite, Apt. #, etc.			Number 3368672	Applied For Not Applicable		
City & State	City & State			licate of Status Desired			
Z ip Country	Zip	Country			<u> </u>	\$8.75 Additional fee Required	
			8. Mak	e check payable to: Dopt	of State (See reve	erse side for fee Information	
9, Name and Address of	Current Registered Agent		10.	If changed, new Registr	ered Agent/Office		
OUTO OOMO II		Name					
SHER, CRAIG H 5858 CENTRAL AVENUE		Street Address (P.C Suite, Apt. #, etc.		O. Box Numbor Is Not Acceptable)			
ST. PETERSBURG FL 33707							
		City		Zíp Code			
for the purpose of changing its registered of	001 and 020 192, Florida Statutes, the above- flice or registered agent, or both, in the State ligations of section 620.192, Florida Statutes.	named limited partners					
for the purpose of changing its registered of agent. I am familiar with, and accept the ob-	ffice or registered agent, or both, in the State of ligations of section 620.192, Florida Statutes. ont) HAT IS A CORPORATION	named limited partners of Florida. Such change	was authorized by	its general pariner(s). H	of the State of Flori nereby 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	flice or registered agent, or both, in the State of ligations of section 620, 192, Florida Statutes. Ont) HAT IS A CORPORATION TUST BE REGISTERED A	named limited partners of Florida. Such change N, LIMITED F AND ACTIVE	ARTNERS WITH TH	DASHIP OR OTH	of the State of Floris hereby accept the TE _ IER BUSIN	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	flice or registered agent, or both, in the State of ligations of section 620, 192, Florida Statutes. ont) HAT IS A CORPORATION JUST BE REGISTERED	named limited partners of Florida. Such change N, LIMITED F AND ACTIVE	PARTNERS WITH TH	its general pariner(s). H	of the State of Flori nereby accept the	appointment of registered	
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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 N 11. Name(s) of General Partner(s)	ont) AAT IS A CORPORATION STATE BE REGISTERED Address of Each G 11a. (Oo NO) Use Post Offi	named limited partners of Florida. Such change N, LIMITED F AND ACTIVE oneral Partner co Box Numbors)	PARTNERS WITH TH H. City. ST. PETERS	DASHIP OR OTH IS OFFICE. State & Zip Code BURG FL 337	of the State of Florishereby accept the DE ER BUSIN 11c. P966	APPOINTMENT OF TEGISTERED NESS ENTITY Registrat on/ Document Number	
agent. I am familiar with, and accept the ob- SIGNATURE (Registered Agent Accepting Appointm A GENERAL PARTNER TI N Name(s) of General Partner(s)	ffice or registered agent, or both, in the State of ligations of section 620, 192, Florida Statutes. Ont) HAT IS A CORPORATION IUST BE REGISTERED A Address of Each G 11a. (Do NOT Use Post Offi 5858 CENTRAL AVEN	named limited partners of Florida. Such change N, LIMITED F AND ACTIVE oneral Partner co Box Numbors)	PARTNERS WITH TH I1b. City. ST. PETERS	DASHIP OR OTH IS OFFICE. State & Zip Code BURG FL 337	of the State of Florishereby accept the DE ER BUSIN 11c. P966	NESS ENTITY Registrat on/ Document Number	
for the purpose of changing its registored of agent. I am familiar with, and accept the ob- SIGNATURE (Registered Agent Accepting Appointm A GENERAL PARTNER TI Name(s) of General Partner(s)	ffice or registered agent, or both, in the State of ligations of section 620, 192, Florida Statutes. Ont) HAT IS A CORPORATION IUST BE REGISTERED A Address of Each G 11a. (Do NOT Use Post Offi 5858 CENTRAL AVEN	named limited partners of Florida. Such change N., LIMITED FAND ACTIVE oners! Partner ce Box Numbers) 1	PARTNERS E WITH TH I1b. City. ST. PETERS	BURG FL 337 GODOGE *****	of the State of Florinereby accopt the TE	Registrat on/ Document Number 000003312 00005-5130-024 ****165.00	

this annual report is true and accurate empowered to execute this report as a

Sher President

12/10/97 813-384-6000