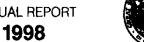
## FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT



CREEKWOOD SAVANNAH LIMITED PARTNERSHIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # **B9300000221**  SECRETARY OF STATE OF STATE OF CORPORATIONS

97 OCT -3 AM 11: 09



Mailing Address	Principal Office Address 4949 WESTGROVE DR. #100 DALLAS TX 75248		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.
4949 WESTGROVE DR.			05/19/1993	\$0.00
#100 DALLAS TX 75248			38. Date of Last Report	
			10/28/1996	5b. Amount of Capital Contributions in FLORIDA
2. Mailing Address	28. Principal Office Address		4. State or Country of Formation DE	to date:
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For
City & State	City & State		72-1240679	Not Applicable
			7. Certificate of Status Desired	\$8.75 Additional Fee Required
Zip Country	Zip Country		8. Make check payable to: Dept. of	State (See reverse side for fee information)
9, Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		10. If changed, new Registered Agent/Office Name		
		Street Address (P.O. Box Number Is Not Acceptable)		
		Suite, Apt. #, etc.		
		City	City FL Zip Code	
10a. Pursuant to the provisions of sections 620.1051 art for the purpose of changing its registered office o agent. I am familiar with, and accept the obligation	registered agent, or both, in the State of F	Florida. Such chan	ge was authorized by its general partner(s). I hen	eby accept the appointment of registered
A GENERAL PARTNER THAT  MUS	IS A CORPORATION,	LIMITED	PARTNERSHIP OR OTHE E WITH THIS OFFICE.	
11. Name(s) of General Partner(s)	11a. Address of Each Gene (Do NOT Use Post Office	eral Parlner Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number
CORAL SPRINGS PROPERTY CORPO	4949 WESTGROVE DR.		DALLAS TX 75248	F93000002349
•			300002 -10/09 ****1	3161232 3/87-01072-013 56.25 ****156.25
· .				KWM

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 filling 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 eath. 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 630. Florida Statutes

**SIGNATURE** 

neral Partner Signing Form ...

Lange

 $_{_{\rm DATE}}$   $\frac{9/25}{}$ 

Davtime Telephone Numbe

972-447-9035

CR2E003 (6/97)