FILE ON OR BEFORE MAY 1, 2000 TO AVOID REVOCATION AND $500 PENALTY FEE

B96000000061

SECRETARY OF STATE
DIVISION OF CORPORATIONS

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LIMITED PARTNERSHIP ANNUAL REPORT

2000

1. Name of Limited Partnership

1a. DOCUMENT # B96000000061

1994-N1 FLORIDA ASSOCIATES LIMITED PARTNERSHIP

Mailing Address	Principal Office Address
700 North Pearl, Suite 2400 Dallas, Texas 75201	700 North Pearl, Suite 2400 Dallas, Texas 75201

3. Date Formed or Registered: 2/15/96

3a. Date of Last Report: 5/24/99

4. State or Country of Formation: DE

5a. Capital Contributions as Shown on record: $2,074,050.00

5b. Amount of Capital Contributions in FLORIDA to date: $0

2. Mailing Address	2a. Principal Office Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

6. FEI Number: 75-2643920 ☐ 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)

9. Name and Address of Current Registered Agent	10. If changed, new Registered Agent/Office
CT CORPORATION 1200 South Pine Island Road Plantation, FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code

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)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number
1994-N1 Florida GP Corp.	c/o AMRESCO Management Inc., 700 North Pearl Street, Suite 2400	Dallas, TX 75201	F96000000772

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3/1/00

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 Allyn S. Patrick DATE 2/17/00

Allyn S. Patrick, Secretary/Treasurer of
Typed or Printed Name of General Partner Signing Form 1994-N1 Florida GP Corp., general partner

Daytime Telephone Number 214/953-7700

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