FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT #

GARDEN ISLES #2 LANDOWNERS LTD



12/19

96 DEC 17 PH 1: 08



lailing Address 2411 NE 15TH TERR. POMPANO BEACH FL 33064	Principal Office Address 2411 NE 15TH TERR. POMPANO BEACH FL 33064	3. Date Formed or Region 02/15/1971 3a. Date of Last Report	\$90,000.00
2. Mailing Address	2a. Principal Office Address	12/18/1995 4. State or Country of Fo	5b. Amount of Capital Contributions in FLORIDA to date:
uite, Apt. #, etc.	Suite, Apt. #, etc.	6. FELNUMBER 32-9032209	Applied For
City & State	City & State	7. Certificate of Status D	
Zip Country	Zip Cour		Fee Required to: Dept. of State (See reverse side for fee information of the information
9. Name and Address of	Current Registered Agent	10. If changed, nev	Registered Agent/Office
2411 NE 15TH TERR. POMPANO BEACH FL 33064		eet Address (P.O. Box Number Is Not Acceptatile, Apt. #, etc	FL Zip Code
for the purpose of changing its registered of	1051 and 620.192, Florida Statutes, the above-named limit office or registered agent, or both, in the State of Florida Soligations of section 620.192 Florida Statutes	ed partnership organized or registered under th uch change was authorized by its general partr	re laws of the State of Florida, submits this statementer(s). I hereby accept the appointment of registers
for the purpose of changing its registered of agent. I am familiar with, and accept the observations (Registered Agent Accepting Appointment of A GENERAL PARTNER T	office or registered agent, or both, in the State of Florida Soligations of section 620 192 Florida Statutes ment) HAT IS A CORPORATION, LIMI JUST BE REGISTERED AND A	ITED PARTNERSHIP OR	DATEDATE
for the purpose of changing its registered of agent. I am familiar with, and accept the observations of the second	phice or registered agent, or both, in the State of Florida Soligations of section 620 192 Florida Statutes HAT IS A CORPORATION, LIMINUST BE REGISTERED AND A Address of Fach General Party 11a. (Do NOT Use Post Office Box Nur	ITED PARTNERSHIP OR LCTIVE WITH THIS OFFIC orthographs of the state of	DATE OTHER BUSINESS ENTITY E. Registrator/
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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 it 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

FRED C. LIENNARD

Daytime Telephone Number