

**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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

12/16 96 DEC 12 AM 10:22

1. Name of Limited Partnership VILLAGE SQUARE LTD.	1a. DOCUMENT # A05179
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Mailing Address P.O. BOX 40 SARASOTA FL 34230	Principal Office Address P.O. BOX 40 SARASOTA FL 34230	3. Date Formed or Registered 08/20/1976	5a. Capital Contributions as Shown on record. \$198.00
		3a. Date of Last Report 11/06/1995	5b. Amount of Capital Contributions in FLORIDA to date: \$198.00
2. Mailing Address	2a. Principal Office Address	4. State or Country of Formation FL	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	6. FEI Number 59-1832852	<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
City & State	City & State	7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip	Country	8. Make check payable to: Dept. of State (See reverse side for fee information)	

9. Name and Address of Current Registered Agent ROSIN, ROBERT P. 222 OSPREY POINT DR OSPREY FL 34229	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City
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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)

President Thirteen Thirty Ben Franklin Inc., a Florida Corporation
10/10/96

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
Limited Partnership MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s) THIRTEEN THIRTY BEN FRANKLIN	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 222 OSPREY POINT DR	11b. City, State & Zip Code OSPREY FL	11c. Registration/Document Number J01902
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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 690, Florida Statutes.

SIGNATURE

President Thirteen Thirty Ben Franklin Inc., a Florida Corporation as

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

10/10/96

General Partnership of Village Square Ltd., a Fla. Limited Partnership

CR2E003 (6/96)