

**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
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**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

97 FEB -7 AM 9:40

1. Name of Limited Partnership WINEWOOD PARK LIMITED	1a. DOCUMENT # A06272
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Mailing Address C/O LOEB PARTNERS REALTY SOUTHEAST, INC. 444 SEABREEZE BLVD., STE. 800 DAYTONA BEACH FL 32118		Principal Office Address C/O LOEB PARTNERS REALTY SOUTHEAST, INC. 444 SEABREEZE BLVD., STE. 800 DAYTONA BEACH FL 32118		3. Date Formed or Registered 01/19/1978	5a. Capital Contributions as Shown on record. \$594,000.00
2. Mailing Address Suite, Apt. #, etc. City & State Zip Country		2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country		3a. Date of Last Report 11/28/1995	
				4. State or Country of Formation FL	5b. Amount of Capital Contributions in FLORIDA to date.
				6. FEI Number 13-2931849	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
				7. Certificate of Status Desired	<input type="checkbox"/> \$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 HUEY, MIKE HUEY, GUILDAY & TUCKER, P.A. 106 EAST COLLEGE AVENUE TALLAHASSEE FL 32301	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code
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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) _____

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) LOEB PTNRS REALTY SE INC	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 444 SEABREEZE BLVD.	11b. City, State & Zip Code DAYTONA BEACH FL	11c. Registration/Document Number F15314
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new fee
02-11
000002085590--4
-02/12/97--01096--006
******541.25 ****541.25**

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 _____

DATE _____

Alan J. Gordon V.P.

Business Telephone Number

212-883-0381

CR2E003 (6/96)