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

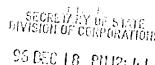
LIMITED PARTNERSHIP ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State
DIVISION OF CORPORATIONS



9. Name and Address of Current Registered Agent MOTTICE, H. JAY		3. Date Formed or Registered 11/01/1978  3a. Date of Last Report 12/04/1995	5a. Cap tal Contributions as Shown on record \$0.00	
INDUSTRIAL NATIONAL BANK BLDG 2111 N. MONROE STREET SUITE 203 TALLAHASEE FL 32303  2. Mailing Address  Suite, Apt #, etc  City & State  Zip  Country  1. Name and Address of Current Registered Agent  MOTTICE, H. JAY		11/01/1978  3a. Date of Last Report	Shown on record	
TALLAHASEE FL 32303  2. Mailing Address  Suite, Apt #, etc  City & State  Zip  Country  TALLAHASEE FL 32303				
Suite, Apt #, etc Suite, Apt. #, etc.  City & State  Zip Country Zip Co  9. Name and Address of Current Registered Agent  MOTTICE, H. JAY	<del></del>		5b. Amount of Capital Contributions in FLORIDA to date	
City & State  Zip Country Zip Co  9. Name and Address of Current Registered Agent  MOTTICE, H. JAY		4. State or Country of Formation		
Zip Country Zip Co			Applied For Not Applicable	
9. Name and Address of Current Registered Agent MOTTICE, H. JAY		7. Cert ficale of Status Desired	\$8.75 Add tional	
MOTTICE, H. JAY	ountry		Fee Required of State (See reverse side for tee information)	
MOTTICE, H. JAY				
1	Name	10. If changed, new Register	red Agent/Office	
2111 N. MONROE STREET	Street Address (P.)	O Box Number Is Not Acceptable)		
2111 N. MONROE STREET SUITE 203 TAILAHASSEE FL 32303		Suite, Apt #, etc		
***************************************	City Zip Code			
10a. Pursuant to the provisions of sections 620 1051 and 620 192. Flor da Statules, the above named lifter the purpose of changing its registered office or registered agent in both, in the State of Florida agent. Fam familiar with land accept the obligations of section 620,192, Florida Statutes.  SIGNATURE (Registered Agent Accepting Appointment).  A GENERAL PARTNER THAT IS A CORPORATION, LITTURE MUST BE REGISTERED AND	a Such change was	DATE  BY THE RESHIP OR OTH	the State of Fior dall submits this statement creby accept the appointment of registered £.	
11. Name(s) of General Partner(s) 11a. Address of Each General Partner(s) (Do NOT Use Post Office Box			11c. Registration/ Document Number	
MOTTICE, HOMER J 2111 N. MONROE ST., #		TALLAHASSEE FL DDDDD2 -12/2 ****	20401600 7/9601135009 191.25 ****191.25	

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 if release the Division of Corporations from any hatfility 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's gnature shall have the same legal effects as if made under outlin. I further certify that I amilia General Partner of the first department of the first partner of the

SIGNAT

DECLORATIONS - JULY HOLD HICE

DATE 12 - 10 - 96
Dayting Telephore Number 904-386-2117

CR2E003 (6/96)