FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # A08197

DORR ASSOCIATES, LTD.

98-AR

FILED

97 OCT -3 AKII: 49

SECULETARY OF STATE TALLAHASSEE, FLORIDA



	C	45	M				
Mailing Address	Principal Office Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record		
ONE SE THIRD AVE STE. 2600 MIAMI FL 33131	ONE SE THIRD AVE STE. 2600 MIAMI FL 33131	STE. 2600		11/29/1979 3a. Date of Last Report 11/26/1996	\$1,195,000.00 5b. Amount of Capital Contributions in FLORIDA to date:		
2. Mailing Address	2a. Principal Office Address			4. State or Country of Formalion			
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For		
City & State	City & State	City & State		22-2288842 7. Certificate of Status Desired	Not Applicable		
Zip Country	Zip	Zip Country			\$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			
ROSENBERG, DONALD S. ONE SE THIRD AVE. STE. 2800			Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc.				
MIAMI FL 33131		City FL Zip C			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 (Do NO1 Use Post Office Bo	l Partner	11b.	City, State & Zip Code	11c.	Registration/ Document Number	
O'NEILL, GEORGE D., JR. O'NEILL, ABBY	MOUNTAIN LAKE 30 SUTTON PLACE	MOUNTAIN LAKE 30 SUTTON PLACE		LAKE WALES FL NEW YORK NY			
O'NEILL, DAVID M.	153 COVE NECK ROAD		OYS	40002: 40002: -10/07: ****\$	7970: 50.00	444 4 1014006 ****\$50.00	
Note: General portners MAY NOT be changed on this form: an amendment must be filed to change a general partner							

SIGNATURE

GRORGED ONAIL JR

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 roport is true and accurate and that my signature shall have the same legal effects as it made under each. I further certify that I am a General Partner of the limited partnership, receiver or trustee