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

1a. DOCUMENT # **A08984**

FILED

96 OCT 29 PN 12: 36

SECKERALY OF STATE TALLAHASSEE, FLORIDA

1 (2011) (1414-2014) (1614-1614) (1614-1614) (1614-1614) (1614-1614) (1614-1614) (1614-1614)



NEIGHBORHO	OD DEVELO	PMENT, LTD.		1 (88) 85) 161) 80) 81 (83) 8 (8)	19111 QIBI BIBI) 81811 81811 81811 81811 81811 1881		
Mailing Address 7425 SW 42 ST. MIAMI FL 33155 Principal Office Address 7425 SW 42 ST. MIAMI FL 33155 MIAMI FL 33155 2a. Principal Office Address		7425 SW 42 ST.		3. Date Formed or Registered 06/09/1980	5a. Capital Contributions as Shown on record \$494,100.00		
				3a. Date of Last Report 11/28/1995 4. State or Country of Formation FL			
					5b. Amount of Capital Contributions in FLORIDA		
		ess	to date				
Suite, Apt #, etc. Suite, Apt #, etc.			6. FEI Number 59-2081004	Applied For Not Applicable			
City & State		City & State		7. Certificate of Status Desired	\$8.75 Add tional		
Zip Co	Country	Ζιρ	Country		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			
MURPHY, LINDA		A ALAMA AND THE STATE OF THE ST	Name	Name			
7425 SW 42 ST.			Street Address (P.O. Box Number Is Not Acceptable)				
MIAMI FL 33155			Suite, Apt #, e	Suite, Apt #, etc			

Pursuant to the provisions of sections 620 1051 and 620 192, Florida Statutes, the above named limited partnership organized or registered under trie 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.

City

SIGNATURE (Registered Agent Accepting Appointment)

DATI

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)	Address of Fach General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number
PROJECT ADVISERS CORP.	7425 S.W. 42ND STREET	MIAMI FL	476006
		60000 1 -11/01 *****	9937261 79601023001 78.25 ****576.25
•			10.20 4444010.23
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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: Trelease 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's gnature 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 trusted empowered to execute this report as required by chapter 620. Florida Statutes.

SIGNATURE

opteral Partner Signing Form

F. Munppy

DATE

Daytime Telephone Number .

10/24/96 (301) 266-1920

Zipi Code

CR2F003 (6/96)