1850 LEE ROAD., SUITE 115 WINTER PARK, FLORIDA 32789 City. State & Zip 2a. New Principal Office Address, If Applicable Suite, Apt. #, etc.										
97 APR 25 AM 9: L1 SECRETARY OF STALE ANNAL EPORT ANNAL EPORT ANNAL EPORT ANNAL EPORT ANNAL EPORT ANNAL EPORT BASE ANNAL EPORT	1ST NOTICE: DUE ON	OR BEFORE DECEN	MBER 31,	1994				F	ILFD	
1. The read blanced Partwerp 1. The read blanced Partwerp 1. The read blanced Partwerp 1. The Partwerp 1. The Partwerp 1. The read blanced Partwerp 1. The Partwerp 1. Th	ANNUAL LEPORT 97 APR 25						5 AM 0			
GRACE PROPERTIES # 111.TT 1850 LEE ROAD., SUITE 115 WINTER PARK, FLORIDA 32789 Discussion of the property of							SECRETARY OF ST.			
GRACE PROPERTIES # 111.TT 1850 LEE ROAD., SUITE 115 WINTER PARK, FLORIDA 32789 Discussion of the property of	Nago al Lygitad Padagshin						IALLA	NHA'S	SEE, FLORIDA	
1850 LER ROAD., SUITE 115 WINTER PARK, PLORIDA 32789—2189 CONDITIONIES THIS SPACE. 2. New Maring Address. Both ASI 4. do: CIU, State & 20	GRACE PROPERTIES #	III A TI		_, , , ,,	İ					
A. THE ASIGN LEE ROAD. SUITE 115 WINTER PARK, PLORIDA 32789 18-50 LEE ROAD. SUITE 115 WINTER PARK, PLORIDA 32789 18-50 CAPPER PARK, PLORIDA 32789 19-50 CAPPER PARK, PLORIDA	1850 LEE ROAD., SUITE 115 WINTER PARK, FLOIRDA 32789-2189									
1850 LER ROAD., SUITE 115 Suite froughest part of the property of the prop										
1850 LEE ROAD., SUITE 115 WINTER PARK, PLORIDA 32789 28. Now Principal Office Address. If Applicable 29. Now Principal Office						Suite, Apl. 4, etc.				
### Pines with the product of the pr						City. State & Zip				
A SUPPLEMENTAL FEE OF \$188.75 PURSUANT TO 5 607.183, FLORIDA STATUTES. THE FILING FEE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$189.75 PURSUANT TO 5 607.183, FLORIDA STATUTES. THE FILING FEE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$189.75 PURSUANT TO 5 607.183, FLORIDA STATUTES. THE FILING FEE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$189.75 PURSUANT TO 5 607.183, FLORIDA STATUTES. THE FILING FEE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$189.75 PURSUANT TO 5 607.183, FLORIDA STATUTES. THE FILING FEE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$189.75 PURSUANT TO 5 607.183, FLORIDA STATUTES. THE FILING FEE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$189.75 PURSUANT TO 5 607.183, FLORIDA STATUTES. THE FILING FEE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$189.75 PURSUANT TO 5 607.183, FLORIDA STATUTES. THE FILING FEE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$189.75 PURSUANT TO 5 607.183, FLORIDA STATUTES. THE FILING FEE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$189.75 PURSUANT TO 5 607.183, FLORIDA STATUTES. THE FILING FEE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$189.75 PURSUANT TO 5 607.183, FLORIDA STATUTES. THE FILING FEE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$189.75 PURSUANT TO 5 607.183, FLORIDA STATUTES. THE FILING FEE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$189.75 PURSUANT TO 5 607.183, FLORIDA STATUTES. THE FILING FEE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$189.75 PURSUANT TO 5 607.183, FLORIDA STATUTES. THE FILING FEE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$189.75 PURSUANT TO 5 607.183, FLORIDA STATUTES. THE FILING FEE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$189.75 PURSUANT TO 5 607.183, FLORIDA STATUTES. THE FILING FEE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$189.75 PURSUANT TO 5 607.183, FLORIDA STATUTES. THE FILING FEE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$189.75 PURSUANT TO 5 607.183, FLORIDA STATUTES. THE FILING FEE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$189.75 PURSUANT TO 5 607.183, FLORIDA STATUTES. THE FILING FEE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$189.75 PURSUANT TO 5 607.183, FLORIDA STATUTES.	WINTER PARK, FLORIDA 32789					28. New Principal Office Address, If Applicable				
9 / 28 / 198						uite, Apt. #, etc.				
58. Cup at Controllorous as Shown 39-2941495 3.55. COC.										
Signatures 1. Supering the second of the second partners of the sec								T		
B. THE BASIC ANNUAL REPORT FILING FEE IS FIGURED AT THE RATE OF \$7.00 PER THOUSAND ON THE ACTUAL CONTRIBUTION PLUS A SUPPLEMENTAL FEE OF \$138.75 PURSUANT TO \$.607.193, FLORIDO STATUTES, THE FILING FEE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$138.75) AND NO MORE THAN \$576.25 (\$43.75) or \$138.75). For questions concerning filling fees, please of \$104.04 \$47-6056. Please submit your 1995 amount report with a check payable to the Secretary of State in U.S. funds through a U.S. bank. 9. Name and Address of Current Registered Agent 10. Name RAJTAR, STEVEN A. 1850 LEE ROAD., SUITE 115 WINTER PARK, PLORIDA 32789 Suite Act. 4, etc. 10. Open Address (P.O. Box Number is Not Acceptable) Suite Act. 4, etc. 10. Open Address (P.O. Box Number is Not Acceptable) Suite Act. 4, etc. 10. Open Address (P.O. Box Number is Not Acceptable) Suite Act. 4, etc. 10. Open Address (P.O. Box Number is Not Acceptable) Suite Act. 4, etc. 10. Open Address (P.O. Box Number is Not Acceptable) Suite Act. 4, etc. 10. Open Address (P.O. Box Number is Not Acceptable) Suite Act. 4, etc. 10. Open Address (P.O. Box Number is Not Acceptable) Suite Act. 4, etc. 10. Open Address (P.O. Box Number is Not Acceptable) Suite Act. 4, etc. 10. Open Address (P.O. Box Number is Not Acceptable) Suite Act. 4, etc. 10. Open Address (P.O. Box Number is Not Acceptable) Suppose of changing is registered depent of the State of Fords Such change was suborized by its general partner(s) in neglect of Process Such change was suborized by its general partner(s) in neglect of Process Such change was suborized by its general partner(s) in neglect of Process Such Change was suborized by its general partner(s) in neglect of Process Such Change was suborized by its general partner(s) in neglect of Process Such Change was suborized by its general partner(s) in neglect of Process Such Change (P.O. Box Number In the State Change In Institute In Institute In Institute Ins	59-2941495	LORIDA to date:							required	
A SUPPLEMENTAL FEE OF \$138.75 FURSUANT TO \$ 607.189, FLORIDA STATUTES. THE FILING FEE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$138.75) AND NO MORE THAN \$57.62 (\$43.75) or \$138.75). For questions concerning filling fees, please call (904) 437-6056. Please submit your 1995 annual report with a check payable to the Secretary of State in U.S. funds through a U.S. bank. 9. Name and Address of Current Registered Agent 10. If changed, new registered apentions RAJTAR, STEVEN A. 1850 LEE ROAD., SUITE 115 WINTER PARK, PLORIDA 32789 108. Pursuant to the provisions of Section 520 (35) and 520 (32) Firrids Statutes, the above named limited partnership proprieted or registered under the lates of the State of Foods, submits this statement for the jumping of thereing its engineer of disequity department of a registered apention (5) Interest States, the above named limited partnership proprieted or registered under the lates of the State of Foods, submits this statement for the jumping of thereing its engineer of disequity states, the above named limited partnership proprieted or registered under the lates of the State of Foods, submits this statement for the jumping of thereing its engineer of thereing its engineer of thereing its engineer of thereing its engineer of the state of Foods, submits this statement for the jumping of the state of Foods, submits this statement for the partnership propriete under the lates of the State of Foods, submits this statement for the jumping and partnership in great partnership proprieted or registered under the lates of the State of Foods, submits this statement with a	1, <u>222,000, </u>		THE RATE O	F \$7.00 PER T	HOUSAI		···	<u> </u>	tora certaicate of States	
RAJTAR, STEVEN A. 1850 LEE ROAD., SUITE 115 WINTER PARK, FLORIDA 32789 Suite, Apr. 4, etc. -05/06/9701077001 City WINTER PARK, FLORIDA 32789 108. Pursuant to the provisions of sections 620 1051 and 620 192, Florida Statutes, the above-hamed limited partnership organized or registered under the laws of the State of Priorida, submits this statement for the purpose of cheory at registered ordical or registered agent, or both, in he State of Florida Statutes agent in a familiar with, and accept the disagnost of section 820 192. Florida Statutes A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Names of General Partner(s) 12. Advise of Each General Partner(s) 13. (Do NOT Use Post Office Box Numbers) 14. (Do NOT Use Post Office Box Numbers) 15. WINTER PARK FL Q 7 830 CM Q - 97 - CUS REINSTATEMENT 16. (Do NOT Use Post Office Box Numbers) 16. (Do NOT Use Post Office Box Numbers) 17. (In Priorical Statutes of the Information supplied with this fing is voluntarily furnished and does not qually for the exemption stated in Section 11807(3)(h), Provide Statutes of Partnership, receiver of trusteen of the Information supplied with Statutes of Statute	A SUPPLEMENTAL FEE OF \$138.75 \$138.75) AND NO MORE THAN \$576	PURSUANT TO s.607.19 5.25 (\$437.50 + \$138.75).	93, FLORIDA For question	STATUTES. T s concerning fil	THE FILII ling fees,	NG FEE SH , please call	ALL BE (904) 4	NO LE 87-6056	SS THAN \$191,25 (\$52.50 +	
Names of General Partners Inc 1850 LEE ROAD., SUITE 115 WINTER PARK, FLORIDA 32789 Suite. Apt. 4, etc.						10, if changed, new registered agent/office				
108. Pursuant to the provisions of sections £20 1051 and £20 1962. 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, agent, agent, and accepting Appointment of section £20 192. Florida Statutes. SIGNATURE, (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Number of General Partner(s) 11a. (Address of Each General Partner(s) 11b. City and State 11c. Registration 11c. Registration 11d. Con NOT Use Post Office Box Numbers) 11b. City and State 11c. Personant Number 11c. Personant Number 11d. Number of General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner. 11 do hereby certly that the information supplied with this fairing is voluntarily furnished and does not quelify for the exemption stated in Section 119 07(3)(k), Piorida Statutes. reverse the Division of Corporations from any labelity of con-complaince with Section 119 07(3)(k) in the event that the information supplied a deemed exempt from public access. Further certify that the information indicated on the Section 119 07(3)(k) in the event that the information supplied a deemed exempt from public access. Further certify that the information indicated on the section of the stepper as engaging of chapter 650, Fordide Statutes. 11 SIGNATURE	DATTAD CTRURN A			Street Address (P.O. Box No	umber is Not Ad	ceptable)			
10a. Pusuant to the provisions of sections 820 1051 and 920 192. Floridal Statutes, the above named limited partnership organized or registered under the laws of the State of Floridal, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Floridal Such change was authorized by its general partner(s). Thereby society the appointment of registered agent, or both, in the State of Floridal Such change was authorized by its general partner(s). Thereby society the appointment of registered agent and complete obtained by its general partner(s). Thereby society the appointment of registered Agent Accepting Appointment). A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Names of General Partner(s). 11a. (Andrews of Each General Partner(s). 11b. City and State. 11c. Registration Document Number of Concentration and State of Partner (s). 11b. City and State. 11c. Registration Document Number of Concentration and State of Partner (s). 11c. Registration of Concentration and State of Partner (s). 11b. City and State. 11c. Registration of Concentration and State of Partner (s). 11c. Registration of Concentration and State of Partner (s). 11c. Registration of Concentration and State of Partner (s). 11c. Registration of Concentration and State of Partner (s). 11b. City and State. 11c. Registration of Concentration and State of Partner (s). 11c. Registration of Concentration and State of Partner (s). 11c. Registration of Concentration and State of Partner (s). 11c. Registration of Concentration and State of Partner (s). 11c. Registration of Concentration and State of Partner (s). 11c. Registration of Concentration and State of Registration and State of Re	1850 LEE ROAD., SUITE 115 Suite, Apt. #, etc.					-05/06/9701077001				
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 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. Names of General Partner(s) 11a. Address of Each General Partner(s) 11b. City and State 11c. Registration 11c. Procurent Number GRACE PROPERTIES INC 1850 LEE ROAD., SUITE 15 WINTER PARK FL Q1 - 97 - CUS REINSTATEINEM Note: General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner. 12 Lide hereby certify that the information supplied with this faing is voluntably furnished and does not qualify for the everyptions from eyi habitips of non-compilation ewith Section 11907(3)(k). Provide Statutes. I reviews the Division of this annual report to true and accurate and that my eignature shall have the same legal effects as if made under each. I further certify that I am a General Partner of the limited partnership, receiver or truste emprovered to execute this report as required by chapter 620. Fiorida Statutes.	WINTER PARK, FLUKIDA 32/09					****4173.75 FI				
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Names of General Partner(s) 11a. (ON NOT Use Post Office Box Numbers) 11b. City and State 11c. Decument Number 11c. Procument Number 11d. (ON NOT Use Post Office Box Numbers) 11d. WINTER PARK FL Q7 830 CM Q1 - 97 - CUS REINSTATEMENT Vote: General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner. 12 I do hereby centry that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(9)k). Florida Statutes. I release the Division of this annual report is true and accurate and that try signature shall have the same legal effects as if made under each. I further certify that I am a General Partner of the limited partnership, receiver or trusteen provinced to execute this report as greatly and change a statute.	for the purpose of changing its registered offi	ce or registered agent, or both, in	n the State of Flor					s). I heret		
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11. Names of General Partner(s) 11a. Address of Each General Partner(s) 11b. City and State 11c. Registration Document Number 1850 LEE ROAD., SUITE 115 WINTER PARK FL 47 830 CM QY-Y-CUS REINSTATEMENT Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner. 12 Ido hereby centry that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption states in Section 119.07(3)(k). Provide Statutes. Trelease the Division of Compositions 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 eath. I further certify that I am a General Partner of the limited perinership, receiver or truste emprovement to execute this report as requiring of chapter 620, Florida Statutes. SIGNATURE Notice Sense Partner of the limited perinership, receiver or truste emprovement to execute this report as requiring of chapter 620, Florida Statutes.			ATION, L	IMITED PA	ARTNE	ERSHIP	OR O	***************************************	R BUSINESS ENTIT	
GRACE PROPERTIES INC 1850 LEE ROAD., SUITE 115 WINTER PARK FL 497830 CM QY-97 - CUS REINSTATEMENT 165 hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 118.07(3)(k). Proida Statutes. I release the Division of Corporations from any lability of non-compliance with Section 119.07(3)(k) in the event that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 118.07(3)(k). Proida Statutes. I release the Division of Corporations from any lability 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 heve the same legal effects as if made under cath. I further certify that I am a General Partner of the limited perhership, receiver or trustee emplowered to execute this report as required by chapter 620. Fiorida Statutes.	<u> </u>	UST BE REGISTE	RED AN	D ACTIVE	WITH	THIS O	FFICE		Registration	
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner. 14. 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). Provide Statutes. I release the Division of Corporations from eny hability 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. Fortida Statutes. SIGNATURE DATE 23397	11. Names of General Partner(s)								Document Number	
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 pertnership, receiver or trusted empowered to execute this report as required by chapter 620. Florida Statutes. SIGNATURE DATE DATE	GRACE PROPERTIES IN	C 1850 LEE	ROAD., 8	SUITE 115	WI	NTER PA	RK	FL	Cen 1800	
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 pertnership, receiver or trusted empowered to execute this report as required by chapter 620. Florida Statutes. SIGNATURE DATE DATE									CM	
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 pertnership, receiver or trusted empowered to execute this report as required by chapter 620. Florida Statutes. SIGNATURE DATE DATE							2			
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 pertnership, receiver or trusted empowered to execute this report as required by chapter 620. Florida Statutes. SIGNATURE DATE DATE				1			(، أنه	-97 -cus	
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 pertnership, receiver or trusted empowered to execute this report as required by chapter 620. Florida Statutes. SIGNATURE DATE DATE								1 1		
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 pertnership, receiver or trusted empowered to execute this report as required by chapter 620. Florida Statutes. SIGNATURE DATE DATE	•					R	EIN	ST	ATEMENT	
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 it 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 requiring by chapter 620, Fiorida Statutes. SIGNATURE DATE	Note: General partners MAY	NOT be changed or	n this form	ı; an amend	dment	must be	filed t	o cha	nge a general partner	
SIGNATURE DATE 3/3/97	Corporations from any liability of non-compliant this annual report is true and accurate and that	ce with Section 119.07(3)(k) in the my signature shall have the same	e event that the in	formation supplied	is deemed	exempt from pu	iblic acce	ss. I furthe	er certify that the information indicated	
And	A X	., C. roptor ago, i ronda diarotes.	•					2	12/9-	
	' - '	Thire	Corne				D/	TE	72111	