


**FILE ON OR BEFORE APRIL 9, 1997 TO AVOID REVOCATION
AND \$500 PENALTY FEE**

FILED

97 FEB 14 AM 11:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED PARTNERSHIP ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra Mortham Secretary of State DIVISION OF CORPORATIONS	
1. Name of Limited Partnership NORTH DALE ASSOCIATES, LTD.		1a. DOCUMENT # A12269 <i>47-AR CM</i>	
Mailing Address C/O COLLIERS CAUBLE & CO. 1355 PEACHTREE STREET, N.E., SUITE 500 ATLANTA GA 30309		Principal Office Address C/O COLLIERS CAUBLE & CO. 1355 PEACHTREE STREET, N.E., SUITE 500 ATLANTA GA 30309	
2. Mailing Address Suite, Apt. #, etc. City & State Zip Country		2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country	
3. Date Formed or Registered 03/19/1982		5a. Capital Contributions as Shown on record. \$4,300.00	
3a. Date of Last Report 12/11/1995		5b. Amount of Capital Contributions in FLORIDA to date:	
4. State or Country of Formation FL		6. FEI Number 58-1476810	
7. Certificate of Status Desired		<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable	
8. Make check payable to: Dept. of State (See reverse side for fee information)		\$8.75 Additional Fee Required	



9. Name and Address of Current Registered Agent LAW, WILLIAM F., JR. 1355 PEACHTREE STREET SUITE 500 ATLANTA GA 30309		10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL 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) CAUBLE, THOMAS V. LAW, WILLIAM F., JR. See Attached Amendment to Certificate and Agreement of Limited Partnership Filed October 14, 1996, 11:25AM Secretary of State, Tallahassee, Florida converting Thomas V. Cauble from a General Partner to a Limited Partner	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 2660 PEACHTREE RD. NW 4044 GLEN DEVON DR., N	11b. City, State & Zip Code ATLANTA GA ATLANTA GA	11c. Registration/Document Number 700002096537--5 -02/25/97--01059--001 *****156.25 *****156.25

CR2E003 (11/96)

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

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

William F. Law, Jr.

404/888-9000