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

LIMITED PARTNERSHIP ANNUAL REPORT 1998



BUELOW 1982 REAL ESTATE GROWTH FUND. LTD.

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

¹A12841 DOCUMENT #

for the form 97 DEC 22 PM 2:31 TALLAHASSEE, FLORIDA

1 100 1 0 10 10 10 10 10 10		

				!	~	If 12/31
Malling Address		Principal Office Address		3. Date Formed or Registered	5a. Capita Show	al Contributions as n on record.
4369 TAMIAMI TRAIL		4369 TAMIAMI TRAIL		07/13/1982	1 40	12,000.00
Suite 250 Charlotte Harbor FL 33980		SUITE 250 CHARLOTTE HARBOR FL 33960		3a. Date of Last Report	7 92	12,000.00
MUNICIPIE HANDON PE 93800		OHARLOTTE HARBOR FL 33900	l	11/27/1996	5b. Amou	int of Capital
. A . M		100 0		4. State or Country of Formation	to dat	ibutions in FLORIDA e:
2. Malling Address		2a. Principal Office Address		FL		
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		6. FEI Number 59-2159117	-1	Applied For
City & State		City & State		7. Certificate of Status Desired		Not Applicable \$8.75 Additional
Zip Cou	ntry	Zip	Country		<u>u</u>	Fee Required
				8. Make check payable to: Dept. of	State (See reve	erse side for fee information)
Q Name a	nd Address of Current R	egistered ågent		10. If changed, new Registere	d ApantiOffice	
70 - 71 - 71 - 71 - 71 - 71 - 71 - 71 - 	110 100 01 00 100 100 100 100 100 100 1	agiotorea rigori	Name	10. It citaliges, now hogistere	a Agentonice	
BUELOW, DALE						
4389 TAMIAMI TRAIL			Streel Address (P	O. Box Number Is Not Acceptable)		
SUITE 250			Suite, Apt. #, etc.			
CHARLOTTE HARBOR FL	33980		City			Zip Code
					FL	2.70 0000
for the purpose of changing	te registered office or re			organized or registered under the laws of the same of		

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. 11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) Registration/ Document Number 11. Name(s) of General Partner(s) 11b. City, State & Zip Code 11c. **BUELOW, DALE** 4369 TAMIAMI TRAIL S-CHARLOTTE HARBOR FL 3 002390971---5 01/06/98--01056--008 ****541.25 ****541.25

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. Ldo hereby certify that the information supplied with this filing is voluntarily furnished and doos 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 trusted propowered to execute this report as required by chapter 620, Figrida Statutes.

SIGNATURE

Typed or Printed Name of General Partner Signing Form

DATE 12/12/97

Daytime Telephone Number