

**FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE**

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96 DEC 31 PM 2:35

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	1a. DOCUMENT # A13381
DELCHER BUILDING INVESTORS LIMITED	



Mailing Address 3100 UNIVERSITY BLVD. SOUTH SUITE 200 JACKSONVILLE FL 32216		Principal Office Address 3100 UNIVERSITY BLVD. SOUTH SUITE 200 JACKSONVILLE FL 32216		3. Date Formed or Registered 10/28/1982	5a. Capital Contributions/as Shown on record. \$22,332.80
				3a. Date of Last Report 01/02/1996	5b. Amount of Capital Contributions in FLORIDA to date. \$22,332.80
2. Mailing Address		2a. Principal Office Address		4. State or Country of Formation FL	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. FEI Number 59-2288450	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
City & State		City & State		7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Country		Country		8. Make check payable to Dept. of State (See reverse side for fee information)	

9. Name and Address of Current Registered Agent MONTALVO, DEBBIE H. 3100 UNIVERSITY BLVD. SOUTH SUITE 200 JACKSONVILLE FL 32216		10. If changed, new Registered Agent/Office Name Geraldine G. Brown Street Address (P.O. Box Number Is Not Acceptable) 3100 University Blvd. South Suite, Apt. #, etc. #200 City Jacksonville FL Zip Code 32216	
10a. Pursuant to the provisions of sections 620.1061 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) <i>Geraldine G. Brown</i> DATE 12/19/96			
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) C & M INVESTORS LIMITED	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 3100 UNIVERSITY BLVD.	11b. City, State & Zip Code JACKSONVILLE FL A10009
<p>000002051120--0 -01/08/97--01100--004 ****295.07 ****295.07</p>		

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 *Patricia H. Clarkson* DATE **12/26/96**
Typed or Printed Name of General Partner Signing Form **Patricia H. Clarkson, V.P.,** Daytime Telephone Number **1-904-359-0045**
The Clarkson Company, General Partner of C & M Investors Ltd.