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

LIMITED PARTNERSHIP ANNUAL REPORT 1997



Typed or Printed Name of General Partner Signing For Carald E. Feldman

FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # **A14194** FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

96 DEC -3 PM 3: 35

Combres phone Number 4/2

A14194							
RIVERDALE CENTER ASSOCIATES, LTD.					1 1001011 1601 11011 1401 1401 1		
			3K 121	9/96			
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.			
ONE ALLEGHENY CENTER	ONE ALLEGHENY CENTER		03/23/1983	\$1,800,000.00			
SUITE 650 PITTSBURGH PA 15212	SUITE 650 PITTSBURGH PA 15212		3a. Date of Last Report 10/05/1995	5b. Amount of Capital Contributions in FLORIDA			
2 Mailine Addrone	29 Dringing Office Address		4. State or Country of Formation	to date:			
Mailing Address Ne Allewheny Sau	are Principal Office Address	Squar	e FL	1,800,000,∞			
Suite, Apt. #, etc. City & State	Suite, Apt. #, etc.	- 0	6. FEI Number 59-2328550	Applied For Not Applicable			
Ony & State	Oity & State	······································	7. Certificate of Status Desired	\$8.75 Additional			
Zip Country	Zip	Country	8. Make check payable to: Dept. of	Fee Required State (See reverse side for fee information)			
9, Name and Address of Current Registered Agent ARANSON, MICHAEL J. 575 SANDPIPER WAY THE SANCTUARY BOCA RATON FL 33431		10. If changed, new Registered Agent/Office Name					
		Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc.					
					City FL Zip Code		
					for the purpose of changing its registered	3 1051 and 620.192. Florida Statutes, the above-name of office or registered agent, or both, in the State of Flo- obligations of section 620.192, Florida Statutes.	
		SIGNATURE (Registered Agent Accepting Appoin A GENERAL PARTNER 1	ITHAT IS A CORPORATION, I MUST BE REGISTERED AN	IMITED P.	ARTNERSHIP OR OTHE WITH THIS OFFICE.		
11. Name(s) of General Partner(s)	11a. (Do NOT Use Post Office B	Partner ox Numbers)	1b. City, State & Zip Code	11c. Registration/ Document Number			
REGP, INC.	ONE ALLEGHENY CRT.	ONE ALLEGHENY CRT., #		F9300000049			
•			0000021 -12/12 *****5	0278701 /9601098016 76.25 ****576.25			
Note: General partners MA	Y NOT be changed on this form	n; an amen	dment must be filed to ch	ange a general partner.			
Corporations from any hability of non-compl	blied with this filing is voluntarily furnished and does no liance with Section 119.07(3)(k) in the event that the in that my signature shall have the same legal effects as red by chapter 620. Florida Statutes.	formation supplied	is deemed exempt from public access. I furth	ner certify that the information indicated on			

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