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

LIMITED PARTNERSHIP
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

*A17 P99 UMENT #

DIVISION OF CORPORATIONS

97 JAN -2 PM 12: 36



WITH REALIT INVESTORS IV, LID.							
			91/9				
Mailion Address 4000 B ST. JOHNS AVE. STE 22	Procipal Office Address 4000 B ST. JOHNS AVE. STE 22			3. Date Formed or Registered 06/08/1984 38 01/02/1996 or 1		5a. Capital Contributions as Shown on record. \$1,210,800.00	
JACKSONVILLE FL 32205	JACKSONVILLE FL 32205						
			4 5144 22 624		5b. Amou Contri to date	nt of Capital butions in FLORIDA	
2. Mailing Address	28. Principal Office Address			4. State or Country of Formation			
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. 59\62229	49	Applied For		
City & State	City & State	 				Not Applicable	_
Zip Country	Zip	Zip Country		7. Certificate of Status Desired \$8.75 Additional Fee Required			
		ayable to: Dept. of	to: Dept. of State (See reverse side for fee information)				
Q Name and Address	of Current Registered Agent	 	10. If change	nd nau Paoistoro	I AgostiOffice		4
HAZLETT, PAUL B.		10. If changed, new Registered Agent/Office Name					-
4000 B ST. JOHNS AVE.			Street Address (P.O. Box Number Is Not Acceptable)				
STE 22							
JACKSONMILE FL 32205			Suite, Apt. #, etc.				
	City			FL Zip Code			
for the purpose of changing its registered	0 1051 and 620.192, Fiorida Statutes, the above-name d office or registered agent, or both, in the State of Flor obligations of section 620.192, Florida Statutes	d limited partner ida, Such chang	ship organized or registered u le was authorized by its genera	nder the laws of that partner(s). I here	e State of Flori	da, submits this statement appointment of registered	
SIGNATURE (Registered Agent Accepting Appoin				DATE			_
A GENERAL PARTNER	THAT IS A CORPORATION, L MUST BE REGISTERED AN	IMITED I	PARTNERSHIP (E WITH THIS OF	OR OTHE FICE.	R BUSII	NESS ENTITY	
11. Name(s) of General Partner(s)	11a. (Do NOT Use Post Office B	il Partner ox Numbers)	11b. City, State & Z	ip Code	11c.	Registration/ Document Number	
HAZLETT, PAUL 8	33 WEST ADAMS STREE	33 WEST ADAMS STREET		JACKSONVILLE FL			
WALTON, WILLIAM H. JR.	33 WEST ADAMS STREE	a	JACKSONVILLE FL				
WEED, JOSEPH D., JR.	33 WEST ADAMS STREE	T	JACKSONVILLE FL				
WWH PROPERTIES, INC.	33 WEST ADAMS STREET		JACKSONVILLE FL		G19370		
			201	00020 -01/14, ****5	57 79701 76.25	7928 166-007 ****576.25	
Note: General partners MA	Y NOT be changed on this form	n an ame	ndment must be t	lled to che	ngo o gr	noral narteer	-

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 eath. 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 W. N. Walty	DATE
Typed or Printed Name of General Partner Signing Form	Davtime Telephone Number