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

LIMITED PARTNERSHIP ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

**DOCUMENT #** Ä17409

SECRETARY OF STATE DIVISION OF CORPORATIONS

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			1 HOREOUT 1906 HORE (BODY OF A	
Mailing Address C/O KLEIN REALTY GROUP, INC. 1700 MARKET ST. SUITE 2600	Principal Office Address  C/O KLEIN REALTY GROUP, INC. 1700 MARKET ST. SUITE 2600 PHILADELPHIA PA 19103		3. Date Formed or Registered 07/05/1984 38. Date of Last Report	5a. Capital Contributions as Shown on record.
PHILADELPHIA PA 19103			11/18/1996 4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA
2. Mailing Address	28. Principal Office Address		FL	
Sulte, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 58-1599026	Applied For Not Applicable
City & State  Zip Country	City & State Zip Country		7. Certificate of Status Desired	\$8.75 Additional Fee Required
Zip Goorlity	Zip Country		8. Make check payable to: Dept. of State (See reverse side for fee Information	
9. Name and Address of C	Surrent Registered Agent	<u> </u>	10. If changed, new Register	red Agent/Oflice
OSWALD, KENNETH F 600 COURTLAND STREET, SUITE 110 ORLANDO FL 32804		Name Street Address (P.O. Box Number Is Not Acceptable)		
		Suite, Apt. #, etc. 700023118873 -10/03/9701114007 -10/03/9701114007 ****169.95L *****169.55		
		City	*****	69.9 <b>6</b> *****169.55
for the purpose of changing its registered of agent. I am familiar with, and accept the obl	lice or registered agent, or both, in the State of Flo igations of section 620,192, Florida Statutes.	ed limited partners rida. Such change	常事事業 hip organized or registered under the taws of was authorized by its general partner(s). I he	the State of Florida, submits this statement of registered
agent. I am familiar with, and accept the obl  SIGNATURE (Registered Agent Accepting Appointm  A GENERAL PARTNER TH	fice or registored agent, or both, in the State of Flo igations of section 620, 192, Florida Statutes.	ed limited partners rida. Such change	*非非能 hip organized or registered under the taws of e was authorized by its general partner(s). I he DAT	the State of Florida, submits this statement of registered accept the appointment of registered
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for the purpose of changing its registered of agent. I am familiar with, and accept the obl  SIGNATURE (Registered Agent Accepting Appointme  A GENERAL PARTNER TH  M  11. Name(s) of General Partner(s)	ince or registered agent, or both, in the State of Florigations of section 620 192, Florida Statutes.  HAT IS A CORPORATION, I IUST BE REGISTERED AN Address of Each General (Do NOT Use Post Office British Control of the British C	ed limited partners rida. Such change LIMITED FID ACTIVE al Partner ox Numbers)	*非米米 hip organized or registered under the laws of e was authorized by its general partner(s). The DAT PARTNERSHIP OR OTHI E WITH THIS OFFICE.	the State of Florida, submitted this statement of registered accept the appointment of registered the statement of
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for the purpose of changing its registered of agent. I am familiar with, and accept the obling SIGNATURE (Registered Agent Accepting Appointment A GENERAL PARTNER THE MINE AND ARTHUR (S) of General Partner(s)  RBL CORPORATION  ZOLLER, EDWARD	ince or registered agent, or both, in the State of Florigations of section 620 192, Florida Statutes.  HAT IS A CORPORATION, I IUST BE REGISTERED AN Address of Each General (Do NOT Use Post Office Both 1700 MARKET STREET, 2	ed limited partners rida. Such change LIMITED FID ACTIVE al Partner ox Numbers)	*#本本的	the State of Florida, submits this statemen preby accept the appointment of registered ER BUSINESS ENTITY  11c. Registration/ Document Number  G93585

comparations from any inability or 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 6/20. Florida Statutes.

SIGNATURE .