

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

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SECRET  
TALLAHASSEE, FLORIDA

LIMITED PARTNERSHIP ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra Mortham Secretary of State DIVISION OF CORPORATIONS
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1. Name of Limited Partnership	1a. DOCUMENT # <b>A18710</b>
<b>PALM CENTER ASSOCIATES LIMITED PARTNERSHIP</b>	



2. Mailing Address % LOVE REALTY 18 HOTEL DRIVE WHITE PLAINS NY 10605		2a. Principal Office Address % LOVE REALTY 18 HOTEL DRIVE WHITE PLAINS NY 10605		3. Date Formed or Registered <b>12/28/1984</b>	5a. Capital Contributions as Shown on record. <b>\$2,540,000.00</b>
3. Date Formed or Registered <b>12/28/1984</b>		3a. Date of Last Report <b>11/14/1995</b>		5b. Amount of Capital Contributions in FLORIDA to date:	
4. State or Country of Formation <b>FL</b>		6. FEI Number <b>13-3216282</b> <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable			
7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		8. Make check payable to: Dept. of State (See reverse side for fee information)			

9. Name and Address of Current Registered Agent <b>HANDELSMAN, BURTON 250 WORTH AVE. PALM BEACH FL 33480</b>	10. If changed, new Registered Agent/Office Name: <b>Corporation Service Company</b> Street Address (P.O. Box Number is Not Acceptable): <b>1201 Hays Street</b> Suite, Apt. #, etc.: City: <b>Tallahassee</b> FL Zip Code: <b>32301</b>
10a. Pursuant to the provisions of sections 620.1051 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. <b>already filed 10/11/96</b>	
SIGNATURE (Registered Agent Accepting Appointment)	

<b>A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b>			
11. Name(s) of General Partner(s) <b>BRONXVILLE ASSOCIATES Limited Partnership</b> <b>Changso Ho White</b> <b>Bronxville II LLC</b>	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) <b>18 HOTEL DRIVE</b> <b>707 Westchester Avenue</b>	11b. City, State & Zip Code <b>WHITE PLAINS NY</b> <b>dec 576.25</b> <b>100002118371--9</b> <b>-03/19/97--01110--021</b> <b>****576.25 ****576.25</b> <b>707 Westchester white Plains NY</b> <b>10604</b>	11c. Registration/Document Number <b>39300000146</b> <b>7906000000</b> <b>399</b>

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 **BRB** DATE **12/28/96**  
Typed or Printed Name of General Partner Signing Form **Bronxville** Daytime Telephone Number **914 681 9450**

CR2E003 (5/96)

CERTIFICATE OF AMENDMENT  
TO  
CERTIFICATE OF LIMITED PARTNERSHIP  
OF  
PALM CENTER ASSOCIATES LIMITED PARTNERSHIP

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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To the Secretary of State  
State of Florida:

The undersigned, the general partner of Palm Center Associates Limited Partnership, a limited partnership formed under the laws of the State of Florida (the "Limited Partnership") does hereby certify that:

1. The name of the Limited Partnership is Palm Center Associates Limited Partnership.
2. The date of filing the certificate of limited partnership of the Limited Partnership is December 28, 1984.
3. The amendment to the certificate of limited partnership effected by the certificate of amendment is to replace the general partner of the Limited Partnership with Bronxville Associates LLC as general partner, and such replacement shall be effective as of February 12, 1996. The address of the General Partner is 18 Hotel Drive, White Plains, N.Y. 10605
4. The name and address of the registered agent is Corporation Service Company, 1201 Hays Street, Tallahassee, Florida 32301. Corporation Service Company is familiar with and accepts the obligations of the position of registered agent.

Bronxville Associates LLC

By: Richard Segal  
Richard Segal, Manager

Corporation Service Company

By: Deborah N. Skipper  
As agent