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 Form



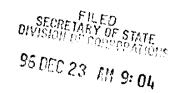
FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # 1a.



| | A21581 | | | <u> </u> |
|--|--|---|--|---|
| KISSIMMEE LODGE, LTD. | | | E ADDAIDH ADAR HABRI ARBON BAKBA HARBA ANDA BABHA BABHA E | |
| | The same Office Address | | 3. Date Formed or Registered | 58. Capital Contributions as |
| Maing Address | Principal Office Address | | 12/20/1985 | Shown on record. |
| 14-TOLLMAN HUNDLEY-HOTELS 100-SUMMIT-LAKE-DR: | 100 SUMMIT LANGER. VALHALLA NY 10506 | | 3a. Date of Last Report | - \$800.00 |
| VALHALLA NY 10695 | | | 10/09/1995 | 5b. Amount of Capital |
| 0 | 20.000 | | 4. State or Country of Formation | Contributions in FLORICA to date: |
| 2. Mailing Address | 28. Principal Office Address 1886 KOUTE 52 | | FL | |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | | 6. FEI Number 13-332 1652 | Applied For Not Applicable |
| Hopewell Junction NY | Hopewell Junction | NY | 7. Certificate of Status Desired | \$8.75 Additional Fee Required |
| 77533 Country / | 70° 12533 | untry / | 8. Make check payable to: Dept. of | of State (See reverse side for fee information |
| 9. Name and Address of Current Registered Agent | | 10. If changed, new Registered Agent/Office | | |
| . PRENTICE-HALL CORPORATION SYSTEM | | Name | | |
| 1201 HAYS STREET | Street Address (P.O. Box Number Is Not Acceptable) | | | |
| TALLAHASSEE FL 32301 | Suite, Apt #, etc. | | | |
| | FL Zip Code | | FL Zip Code | |
| for the purpose of changing its registered office o agent. I am familiar with, and accept the obligation SIGNATURE (Registered Agent Accepting Appointment). A GENERAL PARTNER THAT | ns of section 620 192, Florida Statutes | | DATE | |
| MUS | T BE REGISTERED AND | ACTIVE ' | WITH THIS OFFICE. | EN DOSINESS ENTITY |
| 11. Name(s) of General Partner(s) | Address of Each General Pa (Do NOT Use Post Office Box N | rtner lumbers) 11 | b. City, State & Zip Code | 11c. Registration/ Document Number |
| DAYS KISSIMMEE ASSOCIATES, I | 100 SUMMIT LAKE DR. | | VALHALLA NY 10595 | H91100 |
| | | j | 500 00 2 -01/0 | 20 447152 3/3701105018 191.25 ****191.25 |
| | | | apagore a | A Surface of Bertief |
| * | | | | |
| 1 | | | | |
| Note: General partners MAY NO | The changed on this form; | an amend | lment must be filed to ch | ange a general partner. |
| Lido heroby certify that the information supplied with Corporations from any liability of non-compliance withis annual report is true and accurate and flust my empowered to execute this report as required by cl | ith Section 119 07(3)(k) in the event that the inform signature shall have the same legal effects as if m parting 620. Feyida Staufies | nation supplied is lade under oath. | s deemed exempt from public access. I fur I further certify that I am a General Partner | ther certify that the information indicated or of the limited partnership, receiver or trusted. |
| SIGNATURE James N | Mille The | . e s. | Por G.P. DATE | 12/9/24 |

Daytime Telephorie Number _