

**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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 DEC 20 PM 4:02



1. Name of Limited Partnership

1a. DOCUMENT #
A22420

GLADES FIRST COURT ASSOCIATES, LTD.

Mailing Address
**123 NW 13TH STREET SUITE 800
BOCA RATON FL 33432**

Principal Office Address
**123 NW 13TH STREET SUITE 800
BOCA RATON FL 33432**

3. Date Formed or Registered
04/23/1986

5a. Capital Contributions as
Shown on record
\$500,000.00

3a. Date of Last Report
12/05/1995

5b. Amount of Capital
Contributions in FLORIDA
to date.
\$500,000.00

4. State or Country of Formation
FL

2. Mailing Address
Admin Bldg, 100 Century Blvd.

2a. Principal Office Address
Admin Bldg; 100 Century Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

6. FEI Number
59-2662012

☐ Applied For
☐ Not Applicable

City & State
West Palm Beach, FL

City & State
West Palm Beach, FL

7. Certificate of Status Desired

☐ **\$8.75** Additional
Fee Required

Zip **33417** Country

Zip **33417** Country

8. Make check payable to Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent

10. If changed, new Registered Agent/Office

~~SHAPIRO, DAVID~~
~~123 NW 13TH STREET~~
~~SUITE 800~~
~~BOCA RATON FL 33432~~

Name
Mark F. Levy

Street Address (P.O. Box Number Is Not Acceptable)
Admin. Bldg; 100 Century Blvd.

Suite, Apt. #, etc.

City **West Palm Beach,** **FL** Zip Code **33417**

10a. Pursuant to the provisions of sections 620.105(1) 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.

SIGNATURE (Registered Agent Accepting Appointment)

DATE **11/25/96**

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s)

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

11b. City, State & Zip Code

11c. Registration/
Document Number

DEL FINANCIAL CORP.

**123 NW 13TH STREET;
Admin. Building
100 Century Blvd.**

**BOCA RATON FL 33432
West Palm Beach,
FL. 33417**

G16881

**000002046910--2
-01/06/97--01046--021
****576.25 ****576.25**

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

Mark F. Levy

DATE **11/25/96**

Typed or Printed Name of General Partner Signing Form

Mark F. Levy, President

Daytime Telephone Number **(561) 640-3131**

of Del Financial Corp.