

**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 Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 JAN -9 AM 9:53



1. Name of Limited Partnership BRANDON CROSSINGS, LTD.	1a. DOCUMENT # A22662
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Mailing Address 5050 CENTRAL AVENUE P.O. BOX 41047 ST. PETERSBURG FL 33743	Principal Office Address 5050 CENTRAL AVENUE P.O. BOX 41047 ST. PETERSBURG FL 33743	3. Date Formed or Registered 06/04/1986	5a. Capital Contributions as Shown on record \$99.00
2. Mailing Address P.O. Box 22550 Suite, Apt. #, etc City & State St. Petersburg, FL Zip 33742 Pinellas	2a. Principal Office Address 11300 4th Street North Suite, Apt. #, etc Suite 200 City & State St. Petersburg, FL Zip 33716 Pinellas	3a. Date of Last Report 04/03/1996	5b. Amount of Capital Contributions in FLORIDA to date:
		4. State or Country of Formation FL	
		6. FEI Number 59-2708246	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
		7. Certificate of Status Desired	<input checked="" 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 SEMBLER DEVELOPERS, INC. 5050 CENTRAL AVENUE ST. PETERSBURG FL 33707	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) 11300 4th Street North Suite, Apt. #, etc. Suite 200 City & State St. Petersburg FL 33716
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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.

SIGNATURE (Registered Agent Accepting Appointment) _____

DATE _____

**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) SEMBLER DEVELOPERS, INC.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 5050 CENTRAL AVENUE 11300 4th St., N. # 200	11b. City, State & Zip Code ST. PETERSBURG FL 33716	11c. Registration/Document Number K82527
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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 M. Steven Sembler DATE 12/23/96
Typed or Printed Name of General Partner Signing Form M. Steven Sembler as Daytime Telephone Number 813-577-5522
President of Sembler Developers, Inc.

CR2E003 (6/96)