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

LIMITED PARTNERSHIP ANNUAL REPORT 1998

**HOME DEPOT PLAZA ASSOCIATES, LTD.** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # A22675

Table Laters Units

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SECRETARY OF STATE TALLAHASSEF FLORIDA



Malling Address	Principal Office Address		3. Date Formed or Hegistered	<b>5a.</b> Capital Contributions as Shown on record.
P.O. BOX 41847	5858 CENTRAL AVENUE		06/05/1986	
ST. PETERSBURG FL 33743	ST. PETERSBURG FL 33743		3a. Date of Last Report	\$744,485.00
			02/27/1997	5b. Amount of Capita' Contributions in FLORIDA
			4. State or Country of Formation	to date:
2. Malling Address	28. Principal Office Address	28. Principal Office Address		# 665,012.00
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		
City & State	City & State	City & State		Applied For  Not Applicable
	on, a brane			\$8.75 Additional
Zip Country	722407	33707 Country		Fee Required State (See reverse side for fee information)
	33 10 1		O. Make check payable to. Dept. of	State (See reverse side for fee (normalion)
9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office				
Namo C				
SEMBLER ENTERPRISES INC.	I Street Add		(P.O. Yex Number Is Not Acceptable)	7
5858 CENTRAL AVENUE		5!		Avenue
ST. PETERSBURG FL 33707 Suite, Apt. #, etc.			#, etc.	
		City	Pataclas	FI 33707
7.1.0105000 Y 1 12 100101				
10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutos, the above-named is structured by its general partner(s). Thereby accept the appointment of registered agent, or both, in 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, submits this statement for the purpose of changing its registered office or registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes				
SIGNATURE (Registered Agent Accepting Appointment)			- DATE	12/10/97
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 Goner (Do NOT Use Post Office B		11b. City, State & Zip Code	11c. Registration/ Document Number
SEMBLER ENTERPRISES, INC.	5858 CENTRAL AVENUE	5858 CENTRAL AVENUE		V25013
Semple Citter in thole, inc.	COOL CENTINE ATENCE		ST. PETERSBURG FL 33707	c
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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. Ido 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 Trolease the Division of Corporations from any liability of non-compliance with Section 119,07(3)(k) in the event flat the information supplied is deemed exempt from public access. Further certify that the information indicated on this annual report is true and accurate at that my signature that by 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,

& Sher, President

DATE 12/10/97
Daytime Telephone Number 813-384-6000