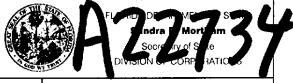
## FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

Zip

32082

LIMITED PARTNERSHIP **ANNUAL REPORT** 1993



97 OCT 15 PM 12: 44

4		
1	Name of Limited Partnership	

Zip

32082

DOCUMENT # 1a. A22734

METROPOLITAN SECURITIES	RITIES COMPANY, LIMITED  NH 10)15/97		
Mailing Address	Principal Office Address	3. Date Formed or Registered	<b>5a.</b> Capita' Contributions as Shown on record.
		June 12, 1986	
		3a. Date of Last Report	\$400,000.00
			5b. Amount of Capital
		4. State or Country of Formation	Contributions in FLORIDA to date:
2. Mailing Address 701 Ponte Vedra Blvd.	2a. Principal Office Address 701 Ponte Vedra Blvd.	Florida	\$400,000.00
Suite, Apt. #, etc.	Suite, Apt. #, etc.	6. FEI Number	Applied For Not Applicable
City & State	City & State	64-0727240	- Not Applicable
Ponte Vedra Beach, FL	Ponte Vedra Beach, FL	7. Certificate of Status Desired	\$8.75 Additional
Zin Country	Zin Country	1	Fee Required

9. Name and Address of Current Registered Agent	10. If changed, new Registered Agent/Office
Whight Danield C	Name
Wright, Donald C. 1301 Riverplace Blvd., Suite 1500	Street Address (P.O. Box Number Is Not Acceptable)
Jacksonville, Florida 32207	Suite, Apt. #, etc10/17/9701073015
	City FL

Country

USA

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)

Country

USA

DATE

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

## A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY

11. Name(s) of General Parlner(s)	BE REGISTERED AND ACTIV 11a. Address of Each General Parlner (De NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number
California Redwood Company	1440 Canal Street Suite 1500	New Orleans, LA 70112	A 22732
Novak Family Limited Partnership	70]. Ponte Vedra Blvd.	Ponte Vedra Beach, FL 32082	A 22733

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

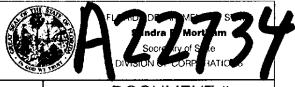
12. I do heroby certily that the information supplied with this filing is duntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of phaney with Section 19 07(3)(k) in the event that the information supplied is deemed exempt from public access 1 further certify that the information indicated on Corporations from any liability of this annual report is true and shall have the same legal effects as if made under <del>-sath. I f</del>urther certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute . 20, Florida Statutes

SIGNATURE

DATE

## 

LIMITED PARTNERSHIP **ANNUAL REPORT** 1993



97 OCT 15 PM 12: 44

**DOCUMENT#** 

Name of Limited Partnership	A22734				
METROPOLITAN SECURITIE	ES COMPANY, LIMITED		hK 1	0)15/97	
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capita' Contributions as Shown on record.	
			June 12, 1986		
			3a. Date of Last Report	\$400,000.00	
				<b>5b.</b> Amount of Capital	
			4. State or Country of Formation	Contributions in FLORIDA to date:	
2. Mailing Address	•	2a. Principal Office Address		\$400,000.00	
701 Ponte Vedra Blvd.	701 Ponte Ved	ra Blyd.	Florida	\$400,000.00	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For	
City & State	City & State	City & Stalo		🖵 Not Applicable	
Ponte Vedra Beach, FL	Ponte Vedra B	each, FL	7. Certificate of Status Desired	\$8,75 Additional	
Zip Country	Zip	Country		Fee Required	
32082 USA	32082	USA	8. Make check payable to: Dept. o	f State (See reverse side for fee information	
9. Name and Address of	Current Registered Agent		10. If changed, new Registers	ed Agent/Office	
		Name	-		
Wright, Donald C.		Street Address (F	P.O. Box Number Is Not Acceptable)		
1301 Riverplace Blvd.,			50000@	73231652 7/9701073015	
Jacksonville, Florida	32207	Suite, Apt. #, etc.	-10/1	7/9701073015	
		City		5 <del>41.25                                    </del>	
for the purpose of changing its registered of	1051 and 620 192, Florida Statules, the abow office or registered agent or both, in the State oligations of section 620, 192, Florida Statutes	e of Florida. Such change w			
SIGNATURE (Registered Agent Accepting Appointm			DATE		
A GENERAL PARTNER TI	HAT IS A CORPORATION  MUST BE REGISTERED	N, LIMITED PA	ARTNERSHIP OR OTHE WITH THIS OFFICE.	R BUSINESS ENTITY	
11. Name(s) of General Partner(s)	11a. Address of Each	General Parlner	b. City, State & Zip Code	11c. Registration/	

11. Name(s) of General Partner(s)	Address of Each General Parlner  Address of Each General Parlner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number
California Redwood Company	1440 Canal Street Suite 1500	New Orleans, LA 70112	A 22732
Novak Family Limited Partner ship	701. Ponte Vedra Blvd.	Ponte Vedra Beach, FL 32082	A 22733

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do heroby certify that the information supported with this filling is folluntarily 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 perticipancy with Section 19.07(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 shall have the same legal effects as if made under sath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute # 20, Florida Statutes

SIGNATURE

DATE .