ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF Sandra Mortham Secretary of State DIVISION OF CORPORATI	tra Martham		4:54	
1. Name of Limited Partnership	1a. A2:	DOCUMENT # 3378	TALLAHASSEE.FLORIDA			
MARINER'S COVE ASSO	CIATES LIMITED) PARTNERSHIP		L HADIGHT HAND FODDE DINGT HILH 	I DARA L HALT BUDIE RUD	II DIƏII UFULI ULUFF UJUFL LI
Mailing Address	Principal Office	Principal Office Address		3. Date Formed or Registered	5a. Capital Shown	Contributions as on record.
3000 TOWN CENTER	3000 TOWN	3000 TOWN CENTER		10/03/1986	5b. Amount of Capital Contributions in FLORIDA to date:	
Suite 540 Southfield MI 48075	Suite 540 Southfiel	Suite 540 Southfield MI 48075		3a. Date of Last Report 10/13/1995		
2. Mailing Address	2a. Principa	2a. Principal Office Address		4. State or Country of Formation		
Suite, Apt. #, etc. City & State	Suite, Apt. #.	Suite, Apt. #, etc.		6. FEI Number 38-2695425		Applied For Not Applicable
Zip Country	Zin	Zip Country		7. Certificate of Status Desired		\$8.75 Additional Fee Required
	2.10	Country		8. Make check payable to: Dept, o	of State (See rever	
9. Name and Address	of Current Registered Agent			10. If changed, new Register	ed Agent/Office	·····
KASS, HODGES, P.A.		Name				
% MIKE KASS	Street Ac	Street Address (P.O. Box Number Is Not Acceptable)				
1505 N. FLORIDA TAMPA FL 33602		Suite, Ap	Suite, Apt. #, etc.			
		City	City Zip Code			
10a. Pursuant to the provisions of sections 6 for the purpose of changing its register agent. I am familiar with, and accept the SIGNATURE (Registered Agent Accepting Appo A GENERAL PARTNER	ed office or registered agent, or I e obligations of section 620.192, intment)	both, in the State of Florida. Such of Florida Statutes.	D PAR	Ithorized by its general partner(s). I he	the State of Florida reby accept the a	ppointment of registere
for the purpose of changing its register agent. I am familiar with, and accept th SIGNATURE (Registered Agent Accepting Appo	ed office or registered agent, or I e obligations of section 620.192, intment) THAT IS A CORP MUST BE REGIS	both, in the State of Florida. Such of Florida Statutes.	D PAR	Ithorized by its general partner(s). I he	the State of Florida reby accept the a	ppointment of registere
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Typed or Printed Name of General Partner Signing Form

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