1. Name of Linded Partnership 1a. DOCUMENT # A24874 NS REALTY '87, LTD. A24874 Malling Address Pincipal Office Address 1717 MOAN River BLVD. SUITE 500 VERO BEACH FL 32500 3. Date Formed or Registered 07/16/1987 58. Captel Contributions 2. Mailing Address Pincipal Office Address 3. Date Formed or Registered 07/16/1987 59. Captel Contributions 2. Mailing Address Pincipal Office Address 74. State of Last Report 01/16/1997 59. Amount of Captel 01/16/1997 2. Mailing Address 28. Principal Office Address FL 59. Amount of Captel 01/16/1997 3. Date formed or Registered 07/16/1987 50. Amount of Captel 01/16/1997 50. Amount of Captel 01/16/1997 2. Mailing Address 28. Principal Office Address FL 50. Amount of Captel 01/16/1997 3. Date formed or Registered 01/16/1987 50. Amount of Captel 01/16/1997 50. Amount of Captel 01/16/1997 2. Mailing Address Country Zip Country 6. Fel Namber 65.000523 Applied Fel Captel 01/16/25/0267 3. Date formed or Registered Agent 10. If charged, new Registered Agent Office 11/17 NDAN RIVER BLVD. Suffer State 10. If charged, new Registered Agent/Office 9. Name and Address of Current Registered Agent Name 10. ODDD 25:D 26:C 7	LIMITED PÅRTNERSHIP ANNUAL REPORT 1998	FLORIDA DEPARTMENT OF STATE Sandre B. Morthem Secretary of State DIVISION OF CORPORATIONS		DIVISION OF CORPORATIONS 98 APR 22 PM 3: 17	
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9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office SCHLITT, LOUIS L 1717 INDAN RIVER BLVD. Name SUITE 300 VERO BEACH FL 32960 Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. 4, etc. 100002502671- City 10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statules, the above-named limited partnership organized or registered under the laws of the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of nagent. I am limitility with, and accept the obligations of section 620.192, Florida Statules. SIGNATURE (Registered Agent Accepting Appointment) DATE A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS EN MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11a. (Do NOT Use Fost Office Box Numbers) 11b. City, State 4 Zip Code 11c. Registerion Date			Country	7. Certificate of Status Desired	S8.75 Additional Fee Required
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 Numbers)	VERO BEACH FL 32960		City ned limited partnership org	ーD4/2 米米米米 panized or registered under the laws of	0/99
11, Name(s) of General Partner(s) 118. (Do NOT Use Post Office Box Numbers) 11D. City, State & Zip Code 11C. Document Nut	for the purpose of changing its registered of agent. I am familiar with, and accept the obl SIGNATURE (Registered Agent Accepting Appointme	flice or registered agent, or both, In the State of Fi ligations of section 620.192, Florida Statules.			
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Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general par 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	for the purpose of changing its registered of agent. I am familiar with, and accept the obl SIGNATURE (Registered Agent Accepting Appointme A GENERAL PARTNER TH M 11. Name(s) of General Partner(s) SCHLITT, LOUIS L	flice or registered agent, or both, In the State of Fi ligations of section 620.192, Florida Statules. ent) IAT IS A CORPORATION, IUST BE REGISTERED AN Address of Each Gene 11a. (Do NOT Use Post Office E 1717 INDIAN RIVER BL	LIMITED PAR ND ACTIVE W rai Partner Sox Numbers) 11b. V V	TNERSHIP OR OTH ITH THIS OFFICE. City, Siele & Zip Code ERO BEACH FL	ER BUSINESS ENTITY