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

LIMITED PARTNERSHIP ANNUAL REPORT

1997

WASHINGTON/BRUSH PARTNERSHIP, LTD.



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # A25596

FILED 97 JAN -2 AN 9:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Mailing Address 100 W. KENNEDY BLVD.	W. KENNEDY BLVD. 100 W. KENNEDY BLVD. #720			3. Date Formed or Registered 11/18/1987	5a. Capital Contributions as Shown on record.	
#720 TAMPA FL 33602				3a. Date of Last Report 12/19/1995	5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address	2a. Principal Office Address			4. State or Country of Formation	to date.	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			6. FEI Number 59-2859301	Applied For	
City & State	City & State			7. Certificate of Status Desired	Not Applicable S8.75 Additional Fee Required	
Zip Country	Zip Country			8. Make check payable to: Dept. of State (See reverse side for fee information)		
Name and Address of Current Re	9. Name and Address of Current Registered Agent			10. If changed, new Registered Agent/Office		
HOWELL, DANIEL B		Name	10. World god, not registered Agend Chice			
100 W. KENNEDY BLVD.	100 W. KENNEDY BLVD. Street Add		ress (P.O. Box Number 510665 11205236118			
		Suite, Apt. #. 6	#. etc01/99/9701032-005			
TAMPA FL 33602	City			****575.25 ****576.25		
		City			FL Zip Code	
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)	11a. (Do NOT Use Post Office Box	Paccer x Numbers)	11b.	City, State & Zip Code	11c. Registration/	
BAY VILLA DEVELOPERS, INC.	100 W. KENNEDY BLVD.		TAMPA FL 33602		G44274	
·				K.A	N. Ind.	
				\		
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), Floride Statutes. I release the Division of

as required by chapter 620, Florida Statutes.

empowered to execute this lepo

SIGNATURE

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. Further certify that the information incloated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under path. Further certify that I am a General Parcher of the limited partnership, receiver or truster.

accurate and that my signature shall have the same legal effects as if made under path. I further certify that I am a General Partner of the limited partnership, receiver or trustee