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

LIMITED PARTNERSHIP ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State DIVISION OF CORPORATIONS

FILE	D		
SEP 26	MA	9:	14
Carrest	(j)	Si	indo
ECKLAHASS	EE.	ŀL	Oltus

1. Name of Limited Partnership

OCUMENT #



TACHKEDE PROPERTIES I TO

TAGI INCEDE	rnorennes, t	-10.	WY-HK CM			
Mailing Address 3975 20TH STREET SUITE J VERO BEACH FL 32960 Principal Office Address 3975 20TH STREET SUITE J VERO BEACH FL 32960 VERO BEACH FL 32960			3. Date Formed or Registered 02/15/1987	5a. Capital Contributions as Shown on record \$7,615,814.00		
		·	2960	3a. Date of Last Report 09/21/1995		
			4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date.		
2. Mailing Add	ress	2a. Principal Office	28. Principal Office Address		SAME AS 5a.	
Suite, Apt. #, etc	3.	Suite, Apt. #, etc.		6. FS Number 59-2863458	Applied For Not Applicable	
City & State		City & State	City & State		\$8.75 Additional	
Zip Country	Country	Zip	Country	7. Certificate of Status Desired	Fee Required	
·				8. Make chock payable to: Dopt. of State (See reverse side for fee information)		
9. Name and Address of Current Registered Agent			<u> </u>	10. If changed, new Registered Agent/Office		
HENDERSON, STEVE L. 817 BEACHLAND BOULEVARD VERO BEACH FL 32964		Name	Namo			
		Streel Address (Street Address (P.O. Box Number Is Not Acceptable)			
		Suite, Apt. #, etc	Suite, Apt #, etc.			
			City	FL Zip Code		
10a. Pursuant t	to the provisions of sections 620 10	051 and 620.192. Florida Statutes, th	he above-named limited partnershi	p 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 pertner(s). Thereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620 192, florida Statutes.

SIGNATURE (Registered Agent Accepting Approntment)

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) Address of Fach General Partner (Do NOT Use Post Office Box Numbers)

City, State & Zip Code

Registration/

ROGERS, T.G., JR.

3975 20TH STREET SUIT

VERO BEACH FL

A25611

SUITE J

32960

700001962607 -10/02/96--01026--023 ****576,25 *****576,25

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

12. Lido heroby 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 Corporations from any natural of non-contributed with Section 119 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 tive and accurate and that my signature shall have the same logal effects as ill made under eath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620. Florida Statules.

T. G. ROGERS Jo

DATE 11 SEPT, 1986 15611 778-3858