

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

FILED

97 JAN -7 AM 9:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



9/1/14

1. Name of Limited Partnership		1a. DOCUMENT # A25964	
RDC HINESVILLE LIMITED PARTNERSHIP			
Mailing Address % RIVERPARK DEVELOPMENT CORPORATION 4300 NORTH UNIVERSITY DR. SUITE E-207 FORT LAUDERDALE FL 33351		Principal Office Address % RIVERPARK DEVELOPMENT CORPORATION 4300 NORTH UNIVERSITY DR. SUITE E-207 FORT LAUDERDALE FL 33351	
2. Mailing Address		2a. Principal Office Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip Country		Zip Country	

3. Date Formed or Registered 02/19/1988	5a. Capital Contributions as Shown on record. \$4,775.00
3a. Date of Last Report 12/26/1995	5b. Amount of Capital Contributions in FLORIDA to date
4. State or Country of Formation FL	
6. FEI Number 65-0032451	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
7. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
8. Make check payable to Dept. of State (See reverse side for fee information)	

9. Name and Address of Current Registered Agent	10. If changed, new Registered Agent/Office	
LEVINE, LAWRENCE A 4300 NORTH UNIVERSITY DRIVE SUITE E-207 FORT LAUDERDALE FL 33351	Name	
	Street Address (P.O. Box Number Is Not Acceptable)	
	Suite, Apt. #, etc.	
	City	FL

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. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/Document Number
RDC 201 CORP.	4300 N UNIVERSITY DR #E	FT. LAUDERDALE FL	M67745

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****191.25 ****191.25

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), Florida Statutes. I release the Division of 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. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. 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 605, Florida Statutes.

SIGNATURE _____ DATE **12-30-96**
Typed or Printed Name of General Partner Signing Form **Lawrence A. Levin** Daytime Telephone Number **954 749 6200**