## FILE ON OR BEFORE APRIL 9, 1997 TO AVOID REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # **A26128** 

DIVISION OF CORPURATIONS

97 MAR 19 PM 12: 51

DATE 3-10-97

12007 CYPRESS RUN   12007 CYPRESS RUN   ORLANDO FL 32896   \$28,022,030.66   \$38,000 of Last Report   02/06/1996   \$5b. Amount of Copital Confidence for the PLORIDA   Colored Florida, State of Courty of Formation   TX   \$33,522,030.66   \$5b. Amount of Copital Confidence for the PLORIDA   Colored Florida, State of Courty of Formation   TX   \$33,522,030.66   \$33,522,030.66   \$5b. Amount of Copital Confidence for the PLORIDA   Colored Florida, State of Courty of Formation   TX   \$33,522,030.66   \$7. Conflicate of Status Desired   Applied For   State   \$7. Conflicate of Status Desired   State   \$8. Make cheeck payable to: Dept. of State (See reverse side for the Information   Tx   State   \$7. Conflicate of Status Desired   State   \$8. Make cheeck payable to: Dept. of State (See reverse side for the Information   Tx   State   Tx	BLUE TREE ORLAN	DO I, LTD.				11111111111111111111111111111111111111	9/97	
2. Malling Address  28. Principal Office Address  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & S	12007 CYPRESS RUN		12007 CYPRESS RUN			03/21/1988 3a. Date of Last Report		
City & State  To Country  Country  Country  To Country	2. Mailing Address		2a. Principal Office Address			•	to date:	
Tourist   Tour								
Name   Street Address (P.O. Box Number is Not Acceptable)   Street Address (P.O. Box Number is Not Acceptable)   Street Address (P.O. Box Number is Not Acceptable)   Sullo, Apt. #, etc.   -0.3/21/3?0.11010.03   -0.3/21/3?0.1101	Zip Country		Zip Country					
the purpose of changing its registered agent, or both, in the State of Fiorida. 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 620.182, Florida Statutes.    Signature (Registered Agent Accepting Appointment)   DATE	CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD			Name  Street Address (P.O. Box Number Is Not Acceptable)  Sulle, Apt. #, etc. = -0.13/21/9701101003				
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(s) of General Partner(s)  11a. Address of Each General Partner (bo NOT Use Post Office Box Numbers)  AOKI REALTY CORPORATION OF F  5401 KIRKMAN ROAD, 6U 12007 Cypress Run Road (CORRECTED ADDRESS)  541.25  VWW - 103.75  CUD - 4.75	the purpose of changing its re I am familiar with, and accept SIGNATURE (Registered Agent Accep	gistered office or registere the obligations of section ting Appointment)	ed agent, or both, in the State of Florida. 620.192, Florida Statutes.	Such change w	vas authorized	t by its general partner(s). I hereby a	ccept the appointn	nent of registered agent.
AOKI REALTY CORPORATION OF F  Story Corporation of F  AOKI REALTY CORPORATION OF F  Story Corporation	A GENERAL PART	NER THAT IS MUST I	BE REGISTERED AN	D ACTIV	PARTI E WITI	NERSHIP OR OTHE H THIS OFFICE.	R BUSINI	ESS ENTITY
12007 Cypress Run Road Orlando, FL 32836 (CORRECTED ADDRESS)  541.25  541.25  600 - 103.75  600 - 550.00	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		Document Number	
	AURI HEALIY CUMPUNA	MION OF F	12007 Cypress Ru (CORRECTED ADDRI	ın Road 355)			K468	34
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.	Note: General partne	rs MAY NOT b	e changed on this form	n; an ame	endmen	t must be filed to cha	ange a gen	eral partner.

Aoki Realty Corporation of Florida

Typed or Printed Name of General Partner Signing FormBy: Masayuki Araki, Vice President Daytime Telephone Number (407) 238-6266

empowered to execute this report as required by chapter 620, Fiorida Statigles

SIGNATURE /

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