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

LIMITED PARTNERSHIP ANNUAL REPORT 1997



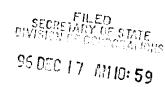
FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT #



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	A20/92		1964 116 116 1			
NTERSTATE CITRUS PART	TNERS, LTD.		1 10,4074 1840 91010 91111 10010			
			3. Date Formed or Registered	5a. Capital Contribut	ione as	
Mailing Address	Principal Office Address		07/26/1988	\$1,268,795.00		
251A ROYAL PALM WAY SUITE 300	251A ROYAL PALM WAY SUITE 300		3a, Date of Last Report			
PALM BEACH FL 33480-4319	PALM BEACH FL 33480-431	19	12/18/1995	5b. Amount of Cap-tal Contributions in FLORIDA to date		
<u> </u>	20 0		4. State or Country of Formation			
2. Mailing Address	Za. Principal Office Addres	a. Principal Office Address		\$1,268,795		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 65-0114350	Applied For		
City & State	City & State		7. Certificate of Status Desired		applicable	
Zip Country	Zip	Country	Country		\$8.75 Additional Fee Required	
			8. Make check payable to Dept of	of State (See reverse side for	r fee information	
9. Name and Address of C	Current Registered Agent	10. If changed, new Registered Agent/Office				
RHODES, PAUL		Name				
251A ROYAL PALM WAY		Street Address (P.O. Box Number Is Not Acceptable)				
SUITE 300		Suite, Apt *, etc -12/20/9601020005				
PALM BEACH FL 33480		City ****576.25 *2#56616.25				
agent. I am familiar with, and accept the ob	ffice or registered agent, or both, in the State ligations of section 620.192, Florida Statutes		e was authorized by its general partner(s). I he	reby accept the appointme		
SIGNATURE (Registered Agent Accepting Appointm A GENERAL PARTNER TH		N I IMITED I	PARTNERSHIP OR OTHE		FNTITY	
N	IUST BE REGISTERED .	AND ACTIVI	WITH THIS OFFICE.			
11. Name(s) of General Partner(s)	11a. (Do NOT Use Post Of	General Partner fice Box Numbers)	11b. City, State & Zip Code		stration/ ent Number	
RHODES, PAUL	251A ROYAL PALM	I WAY,	PALM BEACH FL 33480			
1 4						

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 trusted empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE		DATE 12/10/14 G
Typed or Printed Name of General Partner Signing Form	PAUL RHODES	Daytime Telephone Number 561 650 5400