## FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1998

PDI ST. LUCIE I LIMITED PARTNERSHIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # **A26951** 

98 JAN -2 PM 4: 05



					91/14			
Mailing Address		Principal Office Address			3. Date Formed or Registered	<b>5a.</b> Capital Contributions as Shown on record.		
C/O PIZZUTI DEVELOPMENT, INC. 250 EAST BROAD STREET, SUITE 1800 COLUMBUS OH 43215		C/O PIZZUTI DEVELOPMENT, INC. 250 EAST BROAD STREET, SUITE 1900 COLUMBUS OH 43215			08/26/1988 3a. Date of Last Report \$2,814,583.00		4,583.00	
					01/02/1997	5b. Amount of Capital Contributions in FLORIDA		
2. Malling Address		2a. Principal Office Address			4. State or Country of Formation	to date	ELICITION OF THE PROPERTY OF T	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			OH 6. FEI Number			
		·			31-1250342		Applied For Not Applicable	
City & State		City & State		-	7. Certificate of Status Desired	\$8.75 Additional		
Zip	Country	Zip Country			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				
SIMBACK, KENNETH P			Name					
255 S. ORANGE AVENUE			Street Address (P.O. Box Number Is Not Acceptable)					
SUITE 1350			Suite, Apt. #, etc. 800002405708——7					
ORLANDO FL 32801			Suite, Apt. #, etc.  800002405708—-7  City  *****541. <b>EL</b> *****\$41.25					
for the purpose of cha	sions of eactions 620.1051 and 620 anging its registered office or regis ith, and accept the obligations of s	<ol> <li>192, Florida Statutes, the above-name stered agent, or both, in the State of Flor section 620.192, Florida Statutes.</li> </ol>	d limited partni ida. Such char	ership organ nge was auth	ized or registered under the laws of the control of	ne State of Floric eby accept the i	a, submits this statement appointment of registered	
SIGNATURE (Registered Agent Accepting Appointment)					DATE			
A GENERAL P	ARTNER THAT IS MUST E	A CORPORATION, L BE REGISTERED AN	.IMITED D ACTI\	PART	NERSHIP OR OTHE H THIS OFFICE.	R BUSIN	IESS ENTITY	
11, Name(s) of Genera	l Partner(s)	11a. Address of Each Genera (Do NOT Use Post Office Bo		11b.	City, State & Zip Code	11c.	Registration/ Document Number	
Pizzuti Developmi	ENT, INC	250 E. BROAD STREET,		COL	UMBUS OH	P033	909	
Note: General pa	artners MAY NOT b	e changed on this form	ı; an am	endmer	nt must be filed to cha	ange a ge	neral partner.	

I do hereby certify that the information supplied with this filling 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 19.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated in Section 19.07(3) (k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated in Section 19.07(3) (k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated in Section 19.07(3) (k) in the event that the information supplied is deemed exempt from public access.

event that the information supplied is deemed exempt from public access. I further certify that the information indicated on gal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee