

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 -6 AM 9:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



1. Name of Limited Partnership PARK HOTEL, LIMITED	1a. DOCUMENT # A28698
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Mailing Address 17757 U.S. 19 NORTH CLEARWATER FL 34624 US		Principal Office Address 13575 58TH STREET NORTH CLEARWATER FL 34620		3. Date Formed or Registered 07/31/1989	5a. Capital Contributions as Shown on record. \$200,000.00
				3a. Date of Last Report 01/08/1996	
2. Mailing Address		2a. Principal Office Address		4. State or Country of Formation FL	5b. Amount of Capital Contributions in FLORIDA to date: 200,000
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		6. FFI Number 59-2894269 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
Zip Country		Zip Country		7. Certificate of Status Desired <input checked="" 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 WOHLWEND, BETH C/O WESTFALIA REALTY, INC. 17757 U.S. 19 NORTH, STE 350 CLEARWATER FL 34624	10. If changed, new Registered Agent/Office Name Bernhard Assies Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code
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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) *B. Wohlwend* DATE 12/23/96

**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) KGFL PARK HOTEL CORP.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 13575-58TH STREET NOR	11b. City, State & Zip Code CLEARWATER FL	11c. Registration/Document Number L62522
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****585.00 ****585.00

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 620, Florida Statutes.

SIGNATURE *Marvin J. Slovacek* DATE 12/23/96
Typed or Printed Name of General Partner Signing Form Marvin J. Slovacek Daytime Telephone Number (813) 535-7999

CR2E003 (6/96)