LIMITED PARTNERSHIP ANNUAL REPORT

1997



WILLOW LAKE REALTY INVESTMENTS LTD., A FLORIDA LIMITED PARTNERSHIP

FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # A29084

SECRETARY OF STATE DIVISION OF CORPORATIONS

96 00T 18 PM 12: 42



Mailing Address C/O KIRK FRIEDLAND 501 S. FLAGLER DRIVE. SUITE 505		•		5a. Capital Contributions as Shown on record \$270,000.00	
WEST PALM BEACH FL 33401	WEST PALM BEACH FL JOHUT			5b. Amount of Capital Contributions in FLORIDA to date	
2. Mailing Address	2a. Principal Office Address	2a. Principal Office Address		\$270,000	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		Applied For Not Applicable	
City & State	City & State	City & State			
Zip Country	Zip	Country	7. Certificate of Status Desired	\$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		
FRIEDLAND, KIRK 501 SOUTH FLAGLER DRIVE SUITE 505 WEST PALM BEACH, FL FL 33401		Name			
		Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #. etc.			
					City Zip Code
		Oity	FL FL		
		agent. I am familiar with, and accept the ob-	flice or registered agent, or both, in the State of F igations of section 620 192, Florida Statutes		
SIGNATURE (Registered Agent Accepting Appointme A GENERAL PARTNER TH		LIMITED P		R RUSINESS ENTITY	
M	IUST BE REGISTERED A	ND ACTIVE	WITH THIS OFFICE.	TOO THE OUT OF THE OUT OUT OF THE OUT OF THE OUT OF THE OUT OF THE OUT OUT OF THE OUT	
11. Name(s) of General Partner(s)	11a. (Do NOT Use Post Office	eral Partner Box Numbers) 1	1b. City, State & Zip Code	11c. Registration/ Document Number	
WILLOW LAKE REALTY INVESTMEN	501 S. FLAGLER DR.,	*	WEST PALM BEACH FL	L10586	
			800001: -10/29 ****5	9894288 79601125023 78.25 ****\$76.25	
•				Min	

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 filling is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k), Florida Statutes Trelease 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 and cated on e and that my signature shall have the same logal effects as if made under oath. I further certify that I am a General Partner of the limited partnership receiver or trustee required that have been same to be a supplied to the same to the same to be a supplied to the same to t this annual report is true as

SIGNATURE.

Typed or Printed Name of Gene

DATE 10/16/96