

**FILE ON OR BEFORE APRIL 8, 1998 TO AVOID
REVOCATION AND \$500 PENALTY FEE**

LIMITED PARTNERSHIP ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 APR -3 AM 9:26

1. Name of Limited Partnership RIVER REACH PLAZA, LTD.	1a. DOCUMENT # A30259
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Mailing Address 3003 TAMiami TRAIL NORTH NAPLES FL 33940	Principal Office Address 3003 TAMiami TRAIL NORTH NAPLES FL 33940	3. Date Formed or Registered 06/25/1990 <i>58. Annual Contributions as shown on record</i> 10,000,000
2. Mailing Address 3003 TAMiami TRAIL NORTH Suite, Apt. #, etc. SUITE #400 City & State NAPLES FL Zip 34103 Country US	2a. Principal Office Address 3003 TAMiami TRAIL NORTH Suite, Apt. #, etc. SUITE #400 City & State NAPLES FL Zip 34103 Country US	3a. Date of Last Report 04/10/1997 4. State or Country of Formation FL 5b. Amount of Capital Contributions in FLORIDA to date. \$2,875,960.00
6. FEI Number 65-0201915		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
7. Certificate of Status Desired		<input 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

COLLIER MANAGEMENT SERVICES, INC.
3003 TAMiami TRAIL NORTH
ATTN: TERRY FLORA
NAPLES FL 33940

10. If changed, new Registered Agent/Office

Name
Street Address (P.O. Box Number Is Not Acceptable)
3003 TAMiami TRAIL NORTH
Suite, Apt. #, etc.
SUITE #400
City
NAPLES FL Zip Code
34103

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) _____ DATE _____

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)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration Document Number
COLLIER MANAGEMENT SERVICES,	3003 TAMiami TRAIL NO	NAPLES FL	L56855
200002483132--1 -04/08/98--01107--002 ****526.25 ****526.25			OK 4-9

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 Terry L. Flora DATE 3/20/98

CR2E003 (1/2/97)