## FILE ON OR BEFORE APRIL 9, 1997 TO AVOID REVOCATION **AND \$500 PENALTY FEE**

## LIMITED PARTNERSHIP **ANNUAL REPORT** 1997

CROWNPOINTE COMMERCE PARK, LTD.

Country



Zip

FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State DIVISION OF CORPORATIONS

an-AR

1. Name of Limited Partnership

Zip

**DOCUMENT #** A30267

97 APR 11 AH 9: 45 SECRETARY OF STATE TALLAHASSEE, FLORIDA

FILED



\$8.75 Additional Fee Required

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Mailing Address 3003 TAMIAMI TRAIL NORTH	Principal Office Address 3003 TAMIAMI TRAIL NORTH	3, Date Formed or Registered 06/25/1990	5a. Capital Contributions as Shown on record. \$10,000,000.00	
NAPLES FL 33940	NAPLES FL 33940	3a. Date of Last Report 04/02/1996		
2. Mailing Address	2a. Principal Office Address	4. State or Country of Formation	Contributions in FLORIDA to date: \$8,357,673.00	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	6. FEI Number 65-020 19 13	Applied For	
City & State	City & State		Not Applicable	

9. Name and Address of Current Registered Agent	10. If changed, new Registered Agent/Office			
COLLIER MANAGEMENT SERVICES, INC.	Name			
ATTN: TERRY FLORA	Street Address (P.O. Box Number Is Not Acceptable)  Suite, Apt. #, etc.			
3003 TAMIAMI TRAIL NORTH NAPLES FL 33940				
	City FL Zip Code			

Country

10a. Pursuant to the provisions of sections 620.1051 and 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)

8, Make check payable to: Dept. of State (See reverse side for fee Information)

7. Certificate of Status Desired

## 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. (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number				
COLLIER MANAGEMENT SERVICES	3003 TAMIAMI TR N.	NAPLES FL	L56855				
		800002 -04/1	1466786 7/9701085005				
		****	641.25 ****541.25				
1							

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.

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Typed or Printed Name of General Partner Signing Form

Terry L. Flora

Daytime Telephone Number 941.261.4455