



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

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| LIMITED PARTNERSHIP ANNUAL REPORT 1998 | |  <p>FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS</p> | | <p>FILED SECRETARY OF STATE DIVISION OF CORPORATIONS</p> <p>97 NOV 18 AM 11:35</p>  | |
| 1. Name of Limited Partnership FT. PIERCE REAL ESTATE ASSOCIATES LIMITED PARTNE RSHIP | | 1a. DOCUMENT # A30307 | | | |
| Mailing Address 3600 PENNSY DR. LANDOVER MD 20785 | | Principal Office Address 3600 PENNSY DR. LANDOVER MD 20785 | | 3. Date Formed or Registered 06/28/1990 3a. Date of Last Report 12/10/1996 | |
| 2. Mailing Address 2815 V STREET, NE Suite, Apt. #, etc. | | 2a. Principal Office Address 2815 V STREET, NE Suite, Apt. #, etc. | | 4. State or Country of Formation DC | |
| City & State WASHINGTON, DC Zip 20018 | | City & State WASHINGTON DC Zip 20018 | | 5a. Capital Contributions as Shown on record. \$100,000.00 5b. Amount of Capital Contributions in FLORIDA to date: 100,000.00 | |
| 6. FEI Number 52-1733658 | | <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 C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 | | 10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City | |
| | | FL Zip Code | |

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)

000002354110--5
-11/21/97--01071--004

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

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| 11. Name(s) of General Partner(s) W&M FLA LAND INVESTMENT GROU | 11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 3600 PENNSY DR. | 11b. City, State & Zip Code LANDOVER MD 20785 | 11c. Registration/Document Number A30306 |
|---|--|--|---|

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 X

Michael O. Minnie
MICHAEL O. MINNIE

DATE

11/14/97

Daytime Telephone Number

202-526-4474

CR2E003 (6/97)