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

LIMITED PARTNERSHIP ANNUAL REPORT 1998

SPANISH RIVER EXECUTIVE PLAZA, LTD.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

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DOCUMENT # A30419

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

97 DEC 23 AM 9: 56





Mailing Address	Principal Office Address C/O WALTER J. MACKEY, JR. 1601 FORUM PLACE, SUITE 805		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.
C/O WALTER J. MACKEY, JR.			07/25/1990	\$166,125.00
1801 FORUM PLACE, SUITE 805 WEST PALM BEACH FL 33401			3a. Date of Last Report	
THEO! FALM DENOTIFE SOUL	WEST PALM BEACH FL 33401		01/09/1997	5b. Amount of Capital Contributions in FLORIDA
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	to date:
			FL	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For
City & State	City & State		58-1902033	Not Applicable
Zip Country	Zip Country		7. Certificate of Status Desired	\$8.75 Additional Fee Required
asp Coonty	Z.p County		8. Make check payable to: Dept. of State (See reverse side for fee Information)	
9. Name and Address of Current F	tenistered Agent		10. If changed, new Registered	Agant/Office
Name		Name	10, it oranged, her neglation Agolitonico	
MACKEY, WALTER J JR.		Street Address (P.O. Box Number Is Not Acceptable)		
772 LAGOON DRIVE NORTH PALM BEACH FL 33408		Suite, Apt. #, etc.		
		City		FL Zip Code
10a. Pursuant to the provisions of sections 620 1051 and for the purpose of changing its registered office or reagent. I am familiar with, and accept the obligations of the purpose of	gistered agent, or both, in the State of Florid	limited partnershi; a. Such change w	o organized or registered under the laws of th vas authorized by its general partner(s). I here	e State of Fiorida, submils this statement by accept the appointment of registered
SIGNATURE (Registered Agent Accepting Appointment)	C A CODDODATION III	**		
A GENERAL PARTNER THAT IS MUST	BE REGISTERED AND	ACTIVE	ARTNERSHIP OR OTHE WITH THIS OFFICE.	R BUSINESS ENTITY
11. Name(s) of General Partner(s)	11a. Address of Each General F	· · · · · · · · · · · · · · · · · · ·	b. City, State & Zip Code	11c. Registration/ Document Number
MACKEY/KRUMM VENTURES, INCOR	1601 FORUM PLACE, SUI		WEST PALM BEACH FL 33	P93000073734
			200002: -01/07: *****50	3929027 /98-01084-011 41.25 ****541.25
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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 eath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as youth you change group. Florida Statutes.

December 22, 1997

Typed or Printed Name of General Paymer Signing Form MACKEY/KRUMM VENTURES, INCORPORATED Daytime Telephone Number 561/684-8811