

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 MAR 30 PM 2: 05



1. Name of Limited Partnership	1a. DOCUMENT # A31004
BRANCH/INTERALLIANZ REALTY FUND, L.P. LTD.	

Mailing Address 400 COLONY SQUARE 1201 PEACHTREE STREET, N.E., SUITE 1800 ATLANTA GA 30361		Principal Office Address 400 COLONY SQUARE 1201 PEACHTREE STREET, N.E., SUITE 1800 ATLANTA GA 30361	3. Date Formed or Registered 12/27/1990	5a. Capital Contributions as Shown on record. \$4,400,000.00
2. Mailing Address		2a. Principal Office Address	3a. Date of Last Report 12/13/1996	5b. Amount of Capital Contributions in FLORIDA to date:
Suite, Apt. #, etc.	Suite, Apt. #, etc.		4. State or Country of Formation GA	
City & State	City & State		6. FEI Number 58-1882491	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip	Country	Zip	Country	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 KALEITA, GARY M 215 NORTH EOLA DRIVE ORLANDO FL 32801	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) 200002482962--2 Suite, Apt. #, etc. -04/08/98--01089--014 City ***526.25 FL ***526.25
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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) BRANCH INVESTMENT PARTNERS,	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 400 COLONY SQUARE, SU	11b. City, State & Zip Code ALTANTA GA 30361	11c. Registration/Document Number A33124
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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 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

Richard H. Lee

DATE

3/3/98

Richard H. Lee

4045 892-8900

CR2E003 (12/97)