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

LIMITED PARTNERSHIP ANNUAL REPORT 1997

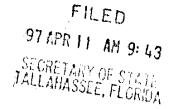


FLORIDA DEPARTMENT OF STATE
Sandra Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

18. DOCUMENT # **A31209**





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Mailing Address 2431 ALOMA AVENUE WINTER PARK FL 32792	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		5a. Capital Contributions as Shown on record. \$500,000.00 5b. Amount of Capital Contributions in FLORIDA to date:			
2. Mailing Address	2a. Principal Office Address	4. State or Country of Formation	\$466,034.95			
Suite, Apt. #, etc. City & State	Suite, Apt. #, etc. City & State	6. FEI Number 59-3041493	Applied For Not Applicable			
Zip Country	Zφ Cou		Fee Required			
		8. Make check payable to: Dept.	of State (See reverse side for fee information)			
9, Name and Address	s of Current Registered Agent	10. If changed, new Registe	10. If changed, new Registered Agent/Office			
HELLING, DALE D. 2431 ALOMA AVENUE WINTER PARK FL 32792		Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc.				
the purpose of changing its registered of I am familiar with, and accept the obliga	520.1051 and 620.192. Florida Statutes, the above-named limit office or registered agent, or both, in the State of Florida. Such altions of section 620.192, Florida Statutes.	ted partnership organized or registered under the laws of change was authorized by its general partner(s). I hereby	accept the appointment of registered agent.			
SIGNATURE (Registered Agent Accepting Appo	THAT IS A CORPORATION, LIM	ITED PARTNERSHIP OR OTH				
11. Name(s) of General Partner(s)	MUST BE REGISTERED AND A 11a. Address of Each General Part (Do NOT Use Post Office Box Nur	·	11c. Registration/			
HELLING, DALE D.	2431 ALOMA AVENUE	WINTER PARK FL				
		200002	21467129 7/9701085013 541.25 *****541.25			

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 filling 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

Dale D. Helling, General Partner

DATE 3/14/97

Dautima Talanhona Number (407) 678-1106