## FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP WILL BE SUBJECT TO 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

1a. DOCUMENT # **A31750** 

SECRETARY OF STATE DIVISION OF CORPORATIONS

96 OCT 24 MM 9: 47



EVERGREEN CLUB APART	IMENTS LIMITED PAR	TNERSHIP		
Mailing Address  C/O FIRST WINTHROP CORPORATION  ONE INTERNATIONAL PLACE  BOSTON MA 02110	Principal Office Address C/O FIRST WINTHROP CORPORATION ONE INTERNATIONAL PLACE BOSTON MA 02110		3. Date Formed or Registered 07/11/1991 3a. Date of Last Report 01/29/1996	5a. Capital Contributions as Shown on record \$1,761,261.00  5b. Amount of Capital Contributions in FLORIDA
2. Mailing Address	2a. Principal Office Addres	2a. Principal Office Address		Contributions in FLORIDA to date.  1,761,261.00
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 04-3121273	Applied For
City & State	City & State	City & State		Not Applicable  \$8.75 Additional
Zip Country	Zıp	7. Certificate of Status Desired  Country  8. Make check payable to Dep		of State (See reverse side for fee information)
0. None and Address of	Course Books and Association		10 If shape of non-Breside	and Annal/Office
9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS ST. STE. 105 TALLAHASSEE FL 32301		10. If changed new Registered Agent/Office  Name		
		Street Address (P.O. Box Number Is Not Acceptable): 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
		****576.25 *****576.25 Cry <b>FL</b> Zip Code		
SIGNATURE (Registered Agent Accepting Appointm  A GENERAL PARTNER TI	<u> </u>	N, LIMITED	PARTNERSHIP OR OTH	
11. Name(s) of General Partner(s)	11a. (Do NOT Use Post Of		11b. City. Stale & Zip Code	11c. Registration/ Document Number
EVERGREEN CLUB CORP.	% 1ST INTERNATIO	-	BOSTON MA 02110	P34400
•-				
•			/	KWM 3
Note: General partners MAY	NOT be changed on this f	orm; an ame	endment must be filed to c	hange a general partner.
12. I do hereby certify that the information supplie Corporations from any liability of non-compilathis annual report is true and accurate and the empowered to execute this report as required.	ed with this fling is voluntarily furnished and do ince with Section 119.07(3)(k) in the event that at my signature shall have the same legal effer I by chapter 620, Florida Statutes	pes not quality for the tree information supp	· · · · · · · · · · · · · · · · · · ·	da Statules. I release the Division of irther certify trial the information indicated on riof the limited partnership, receiver or trustee
SIGNATURE EVERGREEN C		\/W	DATE .	9/20/96
Typed or Printed Name of General Partner Signing F	om Kichard J. McC	vkadi, Pi	CS Iden   Daytime Telephone Number	017-330-8600