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

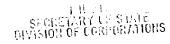
Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT# A32229

POMEROY ASSOCIATES, LTD.

Typed or Printed Name of General Partner Signing Form



96 DEC 18 MI10: 05



Mailing Address 1535 SOUTHBAY DRIVE OSPREY FL 34229	Principal Office Address 1535 SOUTHBAY DRIVE OSPREY FL 34229		3. Date Formed or Registered 11/14/1991 3a. Date of Last Report 01/17/1996	5a. Capital Contributions as Shown on record \$405,000.00 5b. Amount of Capital Contributions in FLORIDA
2. Mailing Address	2a. Principal Office Addre	ess	4. State or Country of Formation	to gate
Suite, Apt. #, etc.	Suite, Apt. #. etc.		6. FEI Number 65-0292349	Applied For
City & State Zip Country	City & State	Country	7. Certificate of Status Desired	\$8.75 Additional Fee Required
Exp Country	24)		8. Make check payable to Dept	of State (See reverse side for fee informat
9. Name and Address of Current Registered Agent POMEROY, LAWRENCE H., JR. 1535 SOUTHBAY DRIVE OSPREY FL 34229		Name Street Address (P.O. Box Number Is Not Acceptable) Suite Apt #, etc City FL Zip Code		
OSPREY FL 34229 10a. Pursuant to the provisions of sections 620 to for the purpose of changing its registered cagent it am familiar with, and accept the observations. A GENERAL PARTNER THE	051 and 620-192, Florida Statutes, the above flice or registereo agant, or both, in the State ligations of section 620-192, Florida Statutes ent).	e-named limited partners of Floridal Such change	ship organized or registered under the laws on the law	FL If the State of Flor dal submits this stateme, ereby accept the appointment of registers
OSPREY FL 34228 10a. Pursuant to the provisions of sections 620 to for the purpose of changing its registered cagent. I am familiar with, and accept the observations of the purpose of changing the purpose of changing the purpose of the purpose of changing the purpose of the	051 and 620-192, Florida Statutes, the above flice or registereo agant, or both, in the State ligations of section 620-192, Florida Statutes ent)	e-named limited partners of Floridal Such change N, LIMITED F AND ACTIVI	ship organized or registered under the laws on the law	FL If the State of Flor dall submits this stateme sereby accept the appointment of register
OSPREY FL 34229 10a. Pursuant to the provisions of sections 620 for the purpose of changing its registered cagent. I am familiar with, and accept the observation of the purpose of changing its registered agent. Accepting Appointm A GENERAL PARTNER TIME. 11. Name(s) of General Partner(s) POMEROY, LAWRENCE H., JR	051 and 620 192, Florida Statutes, the above flice or registereo agant, or both, in the State ligations of section 620 192, Florida Statutes ent)	e-named limited partners of Floridal Such change N, LIMITED F AND ACTIVI General Partner (ffice Box Numbers)	ship organized or registered under the laws of a was authorized by its general partner(s). It DAPARTNERSHIP OR OTH E WITH THIS OFFICE. 11b. City. State 8 Zip Code. OSPREY FL	FL If the State of Flor dal submits this statemereby accept the appointment of register FE
OSPREY FL 34229 10a. Pursuant to the provisions of sections 620 for the purpose of changing its registered agent. I am familiar with, and accept the observation of the purpose of Agent Accepting Appointm A GENERAL PARTNER TIME. 11. Name(s) of General Partner(s)	051 and 620 192, Florida Statutes, the above thee or registereo agent, or both, in the State ligations of section 620 192, Florida Statutes ent)	e-named limited partners of Floridal Such change N, LIMITED F AND ACTIVI General Partner (ffice Box Numbers)	ship organized or registered under the laws of a was authorized by its general partner(s). It PARTNERSHIP OR OTH E WITH THIS OFFICE. 11b. City, State & Zip Code OSPREY FL OSPREY FL	FL If the State of Flor dal submits this statemereby accept the appointment of register FE

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, Trebase 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.

Daytime Telephone Number