

**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

**FILED**  
96 DEC 11 PM 12:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*File*



**1.** Name of Limited Partnership  
**JDRP-NW12 ASSOCIATES, L.P., LTD.**

**1a. DOCUMENT #**  
**A32714**

<b>Mailing Address</b> 4710 EISENHOWER BOULEVARD TAMPA FL 33634		<b>Principal Office Address</b> 4710 EISENHOWER BOULEVARD TAMPA FL 33634		<b>3. Date Formed or Registered</b> 03/20/1992	<b>5a. Capital Contributions as Shown on record.</b> \$3,601,653.00
<b>2. Mailing Address</b> Suite, Apt #, etc. City & State Zip Country		<b>2a. Principal Office Address</b> Suite, Apt. #, etc. City & State Zip Country		<b>3a. Date of Last Report</b> 01/18/1996	
				<b>4. State or Country of Formation</b> DE	<b>5b. Amount of Capital Contributions in FLORIDA to date.</b> \$3,601,653.00
				<b>6. FEI Number</b> 59-3110491	<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
				<b>7. Certificate of Status Desired</b>	<input type="checkbox"/> \$8.75 Additional Fee Required
				<b>8. Make check payable to: Dept. of State (See reverse side for fee information)</b>	

<b>9. Name and Address of Current Registered Agent</b> HOROWITZ, LAWRENCE D 4710 EISENHOWER BLVD SUITE C-1 TAMPA FL 33634-6334	<b>10. If changed, new Registered Agent/Office</b> Name ALLAN ABRAMS Street Address (P.O. Box Number is Not Acceptable) 4710 EISENHOWER BOULEVARD Suite, Apt. #, etc. SUITE C-1 City TAMPA FL Zip Code 33634-6334
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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) *Allan Abrams* DATE 11/25/96

**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)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/Document Number
NW12 CORP.	4710 EISENHOWER BLVD.	TAMPA FL	P37987

800002029278--7  
-12/16/96--01002--020  
\*\*\*\*576.25 \*\*\*\*576.25

**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 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 *Allan Abrams* DATE 11/25/96  
NW 12 Corp, GP by Allan Abrams, Chairman and Treasurer (813) 889-8855  
Typed or Printed Name of General Partner Signing Form Daytime Telephone Number

CR2E003 (6/96)