## 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

Såndra Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

**DOCUMENT #** 

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SECRETARY OF STATE TALLAHASSEE FLORIDA



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NVESTMENTS UNITED OF	TENNESSEE, LTD.		1 (80) 45 108 0 77 109 1 1100 1	11100 1111 Q1911 01011 01011 01017 01011 01011 1001	
Mailing Address  8250 BAYMEADOWS ROAD	Principal Office Address  9250 BAYMEADOWS ROAD #200  JACKSONVILLE FL 32256		3. Date Formed or Registered 06/30/1992	<b>5a.</b> Capital Contributions as Shown on record.	
#200 Jacksonville FL 32256			3a. Date of Last Report 12/08/1995	5b. Amount of Capital Contributions in Ft ORIDA	
2. Malling Address	28. Principal Office Address		4. Stale or Country of Formation	to date:	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 59-3132129	Applied For Not Applicable	
City & State	City & State			\$8.75 Additional Fee Required	
Zip Country	Zip	Country	8. Make check payable to: Dept.	of State (See reverse side for fee information)	
9. Name and Address of Co	urrent Registered Agent		10. If changed, new Registe	red Agent/Office	
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301		Name FF \$576.25 Stroet Address (P.O. Box Number Is Not Acceptable) Cus 8.75			
		Suite, Apt. #, etc.  City    City   Zip Code   Discourse   Discour			
10a. Pursuant to the provisions of sections 620.10 for the purpose of changing its registered off agent. I am familiar with, and accept the oblin	ice or registered agent, or both, in the State of f	med limited partne Florida. Such chan	ge was authorized by its general partner(s). I h	the State of Florida, submits this statement ereby accept the appointment of registered 3/97-01063-001	
SIGNATURE (Registered Agent Accepting Appointme A GENERAL PARTNER TH	AT IS A CORPORATION.	LIMITED	PARTNERSHIP OR OTH		
M	UST BE REGISTERED A	ND ACTIV	E WITH THIS OFFICE.		
11. Name(s) of General Partner(s)  CAFEHM, INC.	11a. (Do NOT Use Post Office Box Numbers)  313 S. PICKETT STREET		11b. City, State & Zip Code  ALEXANDRIA VA	11c. Hegistration/ Document Number	
LANDCOM HOSPITALITY, INC	9250 BAYMEADOWS RD.,#		JACKSONVILLE FL	LOG767 DELLE	
*				original production	
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Note: General partners MAY I					

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 sall have the same legal effects as if made under each. 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.

Toomey

\_\_DATE\_December 9, 1996

Daytime Telephone Number 904-733-3700