FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1997

LENNAR FLORIDA OFFICE Q.A. GP, LTD.



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1. Name of Limited Partnership.

A33291

SECRETARY OF STATE DIVISION OF CORPORATIONS

96 DEC 26 AMII: 42



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LENNAR FLORIDA OFFICE Q.A., 760 NW 107TH AVE., #4		#4	4 MIAMI FL 33172		V56185		
General Partner(s)	Address of East, Cooped Dodges		11b.	City, State & Zip Code	11c.	Registration/ Document Number	
AL PARTNER THA	T IS A CORPORATION,	LIMITED	PARTI	NERSHIP OR OTHE		ESS ENTITY	
se of changing its registered office	or registered agent or both, in the State of I irons of section 620 192, Florida Statutes.	med limited partr Florida. Such cha	ership organi nge was auth	orized by its general partner(s). I her	eby accept the dip	submits this statement pointment of registered	
			City FL Zip Code				
760 NW 107TH AVE., SUITE 400 MIAMI FL 33172		Suite, Apt. #, etc					
		Street Address (P.O. Box Number Is Not Acceptable)					
LENNAR FLORIDA OFFICE Q.A., INC.			Name				
Q Name and Address of Curr	ent Registered Agent			10 If abagast new Resinters	d AnnatiOtto		
Gountry	Zip	Zip Country		8. Make check payable to: Dept. of State (See reverse side for fee information			
				7. Certificate of Status Desired \$8.75 Additional Fee Required			
			65-0360051 Applied For Not Applicable				
			FL				
				4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:		
MIAMI FL 33172	MIAMI FL 33172		-	3a. Date of Last Report	\$990.00		
SHITE 400	Frincipal Office Address 760 NW 107TH AVE SHITE 400			3. Date Formed or Registered 08/11/1992		5a. Capital Contributions as Shown on record	
	Country 9. Name and Address of Curr RIDA OFFICE Q.A., INC. H AVE., SUITE 400 72 e provisions of sections 620 105.1 e of changing its registered office miliar with, and accept the obligat ad Agent Accepting Appointment) AL PARTNER THA MU General Partner(s)	Suite 400 780 NW 107TH AVE SUITE 4 MIAMI FL 33172 Suite, Apt. #, etc. City & Stale Country Zip 9. Name and Address of Current Registered Agent RIDA OFFICE G.A., INC. H AVE., SUITE 400 72 The provisions of sections 620 1051 and 620 192 Florida Statutes, the above-nate of changing its registered office or registered agent or both. In the State of militar with, and accept the obligations of section 620 192, Florida Statutes. AL PARTNER THAT IS A CORPORATION, MUST BE REGISTERED A General Partner(s) 11a. (Do NOT Use Post Office)	SUITE 400 760 NW 107TH AVE SUITE 400 MIAMI FL 33172 Suite, Apt. #. etc. City & State Country 71p Country 72p Country 73p Country 74p Country 75p Country Name Street Add: Street Add: Suite, Apt. City City City City City City Country AL PARTNER THAT IS A CORPORATION, LIMITED MUST BE REGISTERED AND ACTIV That, (po Not Use Post Office Box Numbers)	28. Principal Office Address Suite, Apt. #, etc. City & State Country Zip Country P. Name and Address of Current Registered Agent RIDA OFFICE Q.A., INC. H AVE., SUITE 400 72 Suite, Apt. #, etc City Expressions of sections 620 1051 and 620 192 Florida Statutes, the above-named limited partnership organ are of changing its registered office or registered agent or both, in the State of Florida. Such change was authorities with, and accept the obligations of section 620 192, Florida Statutes. AL PARTNER THAT IS A CORPORATION, LIMITED PART MUST BE REGISTERED AND ACTIVE WIT General Partner(s) 118. (po NOT Use Post Office Box Numbers) 11b.	3a. Date of Last Report 12/29/1995 4. State or Country of Formation FL Suite, Apt. #, etc. 6. FEI Number 65-0360051 City & State Country Zip Country 7b, Name and Address of Current Registered Agent 7c, Certificate of Status Desired 8. Make check payable to Dept. or 8. Name 10. If changed new Registered 10. If changed new Registered 10. Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc City Suite, Apt. #, etc City Ave., SUITE 400 7c City Suite, Apt. #, etc City Suite, Apt. #, etc City Suite, Apt. #, etc City Ave., and accept the obligations of section 620 192. Florida Statutes. Ave. Apt. #, etc City Ave. Accepting Appointment) Ave., and accept the obligations of section 620 192. Florida Statutes. Ave. Apt. #, etc City Ave. Apt. #, etc City	SUITE 400 760 NW 107TH AVE SUITE 400 MIAMI FL 33172 38. Date of Last Report 12/29/1995 5b. Amount. Contributed State or Country of Formation FL Suite, Apt. #. etc. 6. FEI Number 55-0360051 City & State 7. Certificate of Status Desired 8. Make check payable to Dept. of State (See revers RIDA OFFICE Q.A., INC.) H AVE., SUITE 400 72 Suite, Apt. #. etc. City Sireet Address of Current Registered Agent Name Name Sireet Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL 2 Suite, Apt. #, etc. City FL 2 Agent Accepting Appointment) A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINI MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. General Partner(s) 11b. City, State & Zip Code 11c.	

12. I do hereby cert fy that the information supplied with this filing is voluntar by 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 United partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

By: Lennar Florida Office Q.A., Inc., its general partner

SIGNATURE

DATE 12-18-96

Typed or Printed Name of General Partner Signing Form . Thomas F. Nealon III, Assistant Secretary. Daytime Telephone Number