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

JANE D. HEATON LTD.

1a. A93000001042

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SECRETARY OF STATE TALLAHASSEE, FLORIDA



Address Principal Office Address 20720 EAGLE CREEK COURT 20720 EAGLE CREEK COURT BOCA RATON FL 33498 BOCA RATON FL 33498		10	3. Date Formed or Registered 10/06/1993 3a. Date of Last Report		5a. Capital Contributions as Shown on record.									
			0	01/26/1996		5b. Amount of Capital Contributions in FLORIDA								
2. Mailing Address	2a. Principal Office Address		4. Sta	te or Country of Formation	to date:									
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI 6:	Number 5-0440701	Applied For Not Applicable									
City & State	City & State		7. Cer	tificate of Status Desired										
Zip Country	Zip Country			7 - Certificate of Status Desired \$8.75 Additional Fee Required 8. Make check payable to: Dept. of State (See reverse side for fee information)										
	<u></u>		0. ma	ne offect payable to: Dept. of		erse side tor ree trickmation;								
9. Name and Address of Current Registered Agent		10. If changed, new Registered Agent/Office												
HEATON, JANE D 20720 EAGLE CREEK COURT BOCA RATON FL 33498		Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt #, etc.												
								City			FL Zip Code			
							10a. Pursuant to the provisions of sections 620 1051 and 6 for the purpose of changing its registered office or regargent. I am familiar with, and accept the obligations of the control of the contro	sistered agent, or both, in the State of Flo	ed I mited partn rida. Such char	ership organized or n ige was authorized b	egistered under the laws of th y its general partner(s). I here	e State of Flori by accept the	da, submits this statement appointment of registered	
							SIGNATURE (Registered Agent Accepting Appointment)				DATE			
A GENERAL PARTNER THAT IS MUST	A CORPORATION, I BE REGISTERED AN	IMITED D ACTI\	PARTNER E WITH TH	SHIP OR OTHE	R BUSII	NESS ENTITY								
11. Name(s) of General Pacher(s)	11a. (Do NOT Use Post Office Box Numbers) 1		11b. City	, State & Zip Code	11c.	Registration/ Document Number								
HEATON, JANE D	20720 EAGLE CREEK COU		BOCA RATON FL 33498											
Control of the second of the s				0000021	0525 77-01 6.25	9505 092012 ****576.25								
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.														

13. As the base of the second partners with the change of this form, an amendment must be filed to change a general partner

12. If do hereby certify that the information supplied with this filling is votuntarily 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 -

Jane D. Haton

DATE Dec. 27, 1996

CR2E003 (6/96