## 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

<sup>1a.</sup>A94000000186

## ORLANDO REAL ESTATE DEVELOPMENTS, LTD.

FILED

JAN -2 AM 8:58

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Mailing Address 6665 CRISTINA MARIE DRIVE ORLANDO FL 32335	Principal Office Address 6665 CRISTINA MARIE DRIVE ORLANDO FL 32835			3. Date Formed or Registered 02/15/1994  3a. Date of Last Report 01/04/1996	5a. Capital Contributions as Shown on record. \$150,000.00		
			_			5b. Amount of Capital Contributions in FLORIDA to date:	
2. Mailing Address	2a. Principal Office Address			4. State or Country of Formation FL	\$150,000		
Suite, Apt. #, etc.	Suite, Apt. #, etc.			6. FEL Number 59-3230294	Applied For		
City & State	City & State			7. Certificate of Status Desired	Not Applicable  S8.75 Additional		
Zip Country	Zlp Country			Ree Required  8. Make check payable to Dept. of State (See reverse side for fee information)			
9. Name and Address of Current Registered Agent				10 100			
HWANG, CHARLES		Name	10. If changed, new Registered Agent/Office Name				
6665 CRISTINA MARIE DRIVE		Street Address (P.O. Box Number Is Not Acceptable)					
ORLANDO FL 32835	Suite, Apt.						
City			FL Zip Coce				
10a. Pursuant to the provisions of sections 620.1951 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)				DATE			
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. (Do NOT Use Post Office Box Numbers)		11b.	Çity, State & Zip Code	11c.	Registration/Document Number,	
GLOBAL ASSOCIATES INTERNATIO	6665 CRISTINA MARIE D		ORLANDO FL 32835		P94000010537		
			4000020529943 -01/08/9701092019 ****578.25 ****578.25				
T. Committee of the com			$\sqrt{2}$				
Note: General partners MAY NOT b	e changed on this form	n: an ame	endmen	t must be filed to cha	nge a g	eneral nartner	

12. I do hereby certify that the information supplied with this filling is voluntarily lumished and does not qualify for the exemption stated in Section 119.07(3)(k). Fiorida 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, ! 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 .