## FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

**DOCUMENT #** A94000000398

SECRETARY OF STATE DIVISION OF CORPORATIONS

97 OCT -3 PM 2: 04

## PARKER-RALEIGH DEVELOPMENT XXIII, LIMITED PARTNE **5a.** Capital Contributions as Shown on record. 3. Date Formed or Registered Principal Office Address Mailing Address 03/25/1994 201 NORTH FRANKLIN STREET. SUITE 2100 201 NORTH FRANKUN STREET. SUITE 2100 \$0.00 3a. Date of Last Report **TAMPA FL 33602 TAMPA FL 33602 5b.** Amount of Capital Contributions in FLOR!DA to date: 01/02/1997 4. State or Country of Formation 28. Principal Office Address 2. Mailing Address Suite, Apl. #, etc. Suite, Apt. #, etc. 6. FEI Number Applied For Not Applicable 59-3239442 City & State City & State 7. Certificate of Status Desired \$8.75 Additional Fee Required Zip Country Country 8. Make check payable to: Dept. of State (See reverse side for fee information) 9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office EDWARDS, JOSEPH D Street Address (P.O. Box Number Is Not Acceptable) 201 NORTH FRANKLIN STREET, SUITE 2100 Suite, Apt. #, etc. **TAMPA FL 33602** City Zip Code 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 Floridal 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) \_\_\_\_ A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. 11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) Registration/ 11. Name(s) of General Partner(s) City, State & Zip Code Document Number PARKER-RALEIGH DEVELOPMENT X 201 NORTH FRANKLIN ST **TAMPA FL 33602** P94000023448 500002313785--9 -10/07/97--01040--009 \*\*\*\*158.25 \*\*\*\*156.25 Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

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 Pariner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620. Florida Statutes.

SIGNATURE

Typed or Printed Name of General Partner Signing

Daytime Telephone Number

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