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

LIMITED PARTNERSHIP ANNUAL REPORT 1998

Typed or Printed Name of General Partner Signing Form



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # **A9400000510**

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

97 OCT -3 PM 2: 04



PARKER-RALEIGH DEVELOPM IIP	IENT XXV, LIMITED	PARTNE	RS	6 LABOLON (G.IO SEITH OLGUN DOTAL)	EBINI BƏNX BONI GƏNI BUN BUND UNUN ILDIN ƏBN SƏ	
Mailing Address 201 NORTH FRANKLIN STREET, SUITE 2100	ORTH FRANKLIN STREET, SUITE 2100 201 NORTH FRANKLIN STREET, SUITE 2100		3	Date Formed or Registered	5a. Capital Contributions as Shown on record.	
TAMPA FL 33602			3	B. Date of Last Report	\$0.00	
			1	12/31/1996	5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address	2a. Principal Office Address		1	State or Country of Formation	to date	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6	FEI Number	☐ Applied For	
City & State	City & State		 -	59-3239447	Not Applicable	
Zip Country	Zip Country			Certificate of Status Desired	\$8.75 Additional Fee Required	
			8	Make check payable to: Dept_cl	State (See reverse side for fee informati	
9. Name and Address of Curren	t Registered Agent			10. If changed, new Registere	ed Agent/Olfice	
EDWARDS, JOSEPH D 201 NORTH FRANKLIN STREET, SUITE 2100		Name				
		Street Address (P.O. Box Number Is Not Acceptable)				
TAMPA FL 33602		Suite, Apt. #, e		IC.		
		City			FL Zip Code	
SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT MILS		N, LIMITED	PARTNI	ERSHIP OR OTHE	ER BUSINESS ENTITY	
11. Name(s) of Goneral Partner(s)	11a. Address of Each G	angeal Designer	11b.	City, State & Zip Code	11c. Registration/	
PARKER-RALEIGH DEVELOPMENT X	201 NORTH FRANKLIN ST		TAMPA FL 33602		P94000027699	
				500002 -10/07 *****1	31379567/9701040011 56.25 ****156.25	
				dee		
Note: General partners MAY NO	be changed on this for	orm; an ame	endment	must be filed to ch	ange a general partner	
12. I do hereby certify that the information supplied with Corporations from any liability of non-compliance wit this annual report is true and accurate and that my s empowered to execute this report as required by the	h Section 119.07(3)(k) in the event that ignature shall have the same legal effec	the information supp	lied is deemed	exempt from public access. I furti	her certify that the information indicated :	
SIGNATURE	- (old	_		_ DATE		

Daytime Telephone Number