LIMITED PARTNERSHIP **ANNUAL REPORT** 1997

SUNRISE TOWERS, LTD.



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

A94000000797

97 JAN -2 AM 9: 43



Mailing Address P.O. BOX 49948 SARASOTA FL 34230-6948	Principal Office Address 240 SOUTH PINEAPPLE AVENUE. 10TH FLOO SARASOTA FL 34236		3	3. Date Formed or Registered 06/10/1994 3a. Date of Last Report 01/22/1996	58. Capital Contributions as Shown on record. \$421,400.00 5b. Amount of Capital Contributions in FLORIDA to date: \$421,400.00		
2. Mailing Address	2a. Principal Office Address			4. State or Country of Formation			
Suite, Apt. #, etc	Suite, Apt. #, etc.			6. FEI Number 65-0498651 Applied For Not Applicable			
City & State	City & State			7. Certificate of Status Desired \$8.75 Additional			
Zip Country	Zip Country			Fee Required 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			
BAND, DAVID S 240 S. PINEAPPLE AVE. 10TH FLR. SARASOTA FL 34238		Name					
		Street Address (P.O. Box Number Is Not Acceptable)					
		Suite, Apt. #, etc. City FL Zip Code					
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 PAR MUST BE REGISTERED AND ACTIVE W				RTNERSHIP OR OTHER BUSINESS ENTITY			
11. Name(s) of General Partner(s)	11a. (Do NOT Use Post Office Br		11b.	City, State & Zip Code	11c.	Registration/	
SUNRISE TOWERS CORP.	240 SOUTH PINEAPPLE A		SARASOTA FL 34236		P9400043696		
•				600002 -01/1/ ****	2057: 4/970 576.25	8765 1171010 ****576.25	
•						KWM 3	
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner. 12. Lob 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							
12. Too hereby certify that the information supplied with this Corporations from any liability of non-compliance with Se this annual report is true and accurate and that my signal empowered to execute this report as required by glaph SIGNATURE SIGNATURE Typed or Printed Name of General Partner Signing Form	action 119.07(3)(k) in the event that the in type shall have the same legal effects as	formation suppli	ed is deeme	d exempt from public access. I furth	er certify that the the limited part	e information indicated on	
	par 1/18				4//344	0009278	

CR2E003 (6/96)