SIGNATURE

1. Name of Limited Partnership									1	
Ruro-American Center Partners, Ltd.									ļ	
					DO NOT WRITE IN THIS SPACE.					
2. Mailing Address 231 Bradley Place		3. Principal Office Address 231 Bradley Place			4. Date Formed or Registered To Do Business in Florida 08/02/1994					
Suite, Apl. #, etc Suite 200		Suite, Apt #, etc. Suite 200			5. FEI Numl	ber	-		Applied For	
City & State Palm Beach, FL		City & State			65-0525018 Not Applicable					
Zip Palm Bea	COUNTRY COUNTRY	Palm Beach, FL Zip Country			6. CERTIFICATE OF STATUS DESIRED X 58.75 Additional Fee requires for a Certificate of State					
33480	USA	33480	USA	ļ	7. State or C	Country of Formation	FL			
8a. Capital Contributions on Record: \$3,5  8b. Amount of Capital ConfLORIDA to date. \$3,562,381.0	<b>62,381,00</b> ntributions in	FEES:1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 8b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office.  2.) Supplemental Fee(s): \$103.75 for each year due this office, beginning with 1992 calendar year.  3.) Penalty Fee(s): \$500 penalty fee for each year report form is delinquent.  Note: If the amount entered in 8b is greater than amount entered in 8a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.								
9. 1	Name and Address of Current R	<del></del>			10. If changed, new registered agent/office					
Bruce W,	Keihner, P.A.		Name							
411 Sout	h County Road	Streot Address (P.O.			Box Numbor Is Not Acceptable)					
Suite 20	0	Suite, Apt. #, etc.			-07/14/9701164010					
Palm Bea		City	ciy ***1102.50 ***•••050.00					050.00		
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 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. Names of Genera		Address of Each ( (Do NOT Use Post Of	General Partner	Orty, Stale and Zin Code			11a.		Iration it Number	
Euro-American  amendment	_	C/O 231 Brad	-	DEINIC	· · · · · · · · · · · · · · · · · · ·	EMEN	91	7 7-		
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.										

do hereby certify that the information supplied with this filling is voluntary fulfiling has 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 119.02(3)(by in prevent 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 floring Structures.
empowered to execute this report as required by chapter 620 Plorigits Sylvites.

DATE 6/18/97

Typed or Printed Name of General Partner Signing Form Sid H. Eibl, President \_\_\_\_\_ Telephone Number (561)835-1999