FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE



96 DEC 18 PH 2: 48

SECRETARY OF STATE

LIMITED PARTNERSHIP ANNUAL REPORT	FLORIDA DEPARTMENT OF STATE Sandra Mortham Secretary of State		IALLAHASSEE, FLORIDA		
1997	DIVISION OF C	ORPORATIONS		LED	
Name of Limited Partnership 1a. DOCUMENT # A9400001058					
SHLESINGER HOMES - BOYN	NTON BEACH, LTD.		1 70010/1 1017 70/11 4/1011 70/14 1	11ki odnik odnik odnok sloke bolde bildi idik 1900	
				12/26	
Mailing Address C/O SHLESINGER HOMES DEVELORMENT CORP. 24 DESFORD LN	Principal Office Address C/O SHLESINGER HOMES DEVELORMENT CORP. 24 DESFORD LN BOYNTON BEACH FL 33462		3. Date Formed or Registered 08/01/1994 38. Date of Lest Report	5a. Capital Contributions as Shown on record \$12,375.00	
BOYNTON BEACH FL 33462			01/09/1996 4. State or Country of Formation	5b) Amount of Capital Contributions in FLORIDA	
2. Mailing Address SAME AS ABOVE	2a. Principal Office Address	28. Principal Office Address		to date:	
Suite, Apt. #, etc.	Suite, Apt. #, etc. City & State			Applied For Not Applicable	
City & State		Zip Country		\$8.75 Additional Fee Required	
Zip Country	ZID	2 Cooling		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 Registere	10. If changed, new Registered Agent/Office	
SHLESINGER, MARIO		Name		·	
24 Desford Lane BOYNTON BEACH FL 33462		Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. 4, etc.			
				FL Zip Code	
10a. Pursuant to the provisions of sections \$20.10\$1 for the purpose of changing its registered office agent. I am familiar with, and accept the obligation	or registered agent, or both, in the State of Fk			he State of Florida, submits this statement	
SIGNATURE (Registered Agent Accepting Appointment)			DATE		
A GENERAL PARTNER THA	T IS A CORPORATION, ST BE REGISTERED AN	LIMITED P	ARTNERSHIP OR OTHE WITH THIS OFFICE.	ER BUSINESS ENTITY	
11. Name(s) of General Partner(s)	11a. (Do NOT Use Post Office I	al Partner Box Numbers) 1	1b. City, State & Zip Code	11c. Registration/ Document Number	
SHLESHIGER HOMES DEVELOPMENT	. 6/0 1101 BRICKELL AV	Æ	ARAMPE SPRINGER	P94000058892	
5	24 DESFORD I	LANE	BOYNTON BEACH, F 33462		
\$			000002	0410601 0/9601039007 25.37 ****225.37	
· !			<i>क\$रान</i> {	EG. 01 meanticutor	
Note: General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner. 12. I do hereby certify that the Information supplied with this filling is voluntarily furnished and does 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 w this annual report is true and accurate and that my	with Section 119.07(3)(k) in the event that the signature shall have the same legal effects a	information supplied	is deemed exempt from public access. I furt	her certify that the information indicated on	
empowered to execute this report as required by o	maple: 620, Fiorida Statutes.			· \ . \	

Typed or Printed Name of General Partner Signing Form _

SIGNATURE.