

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

LIMITED PARTNERSHIP  
ANNUAL REPORT  
**1997**



FLORIDA DEPARTMENT OF STATE  
**Sandra Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

90 DEC 24 1996

1. Name of Limited Partnership

1a. DOCUMENT #  
**A94000001232**

**PALM BEACH PARTNERS, LTD.**



2. Mailing Address

Principal Office Address

**6585 DILLMAN ROAD-EXTENSION  
WEST PALM BEACH FL 33413**

**6585 DILLMAN ROAD-EXTENSION  
WEST PALM BEACH FL 33413**

3. Date Formed or Registered

**09/08/1994**

5a. Capital Contributions as  
Shown on record

**\$950.00**

3a. Date of Last Report

**01/18/1996**

5b. Amount of Capital  
Contributions in Foreign  
to date

**950.00**

4. State or Country of Formation

**FL**

6. FID Number

**65-0520850**

☐ Applied For  
☐ Not Applicable

7. Certificate of Status Desired

☒ **\$8.75 Additional  
Fee Required**

8. Money check payable to: Dept. of State (See reverse side for information)

2. Mailing Address

**500 Australian Ave**

**Suite 110**

**West Palm Beach FL**

**Zip 33401 Country USA**

2a. Principal Office Address

**500 Australian Ave**

**Suite 110 Box 134**

**West Palm Beach FL**

**Zip 33401 Country USA**

9. Name and Address of Current Registered Agent

**DUDE, HAROLD**

**6585 DILLMAN ROAD-EXTENSION  
WEST PALM BEACH FL 33413**

10. If changed, new Registered Agent/Office

**100002045341-0**

**-01/03/97-01133-018**

Sheet Address (FID) Box Number Is Not Applicable **\*\*\*\$200.00\*\*\* \$200.00**

**500 Australian Ave**

**Suite 110**

**West Palm Beach**

**FL 33401**

10a. Pursuant to the provisions of Sections 605.10 and 605.11, Florida Statutes, the above named limited partnership organization or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or principal office in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I understand with this acceptance the registered office of said limited partnership.

Signature of Registered Agent (Accepting Appointment)

*[Signature]*

**HAROLD DUDE**

**DATE 12-9-96**

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY  
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name of General Partner(s)

11a. Address of First General Partner  
(Do NOT Use Post Office Box Numbers)

11b. City, State & Zip Code

11c. Registration  
Document Number

**SOUTHFIELD FARMS CORPORATION  
Greenwich Investments  
Holding, Inc  
Amendment already  
filed Aug 23, 1996**

**6585 DILLMAN ROAD EXT  
500 Australian  
avenue  
suite 110**

**WEST PALM BEACH FL 33401**

**H99180  
P95-34690**

*[Signature]*  
**12-31**

**Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.**

12. I hereby certify that the information supplied in this document is true and correct and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(b) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on the annual report is true and correct and that I am, and have been, the same legal entity as indicated under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee responsible for compliance with the provisions of Sections 605.10 and 605.11, Florida Statutes.

SIGNATURE

Type for Print a Name of General Partner Signing Form

**Greenwich Investments Holding, Inc**  
**HAROLD DUDE**

**DATE 12-9-96**  
**833-4433**

Daytime Telephone Number

CP2003 (6/96)