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

1. Name of Limited Partnership

na. DOCUMENT # **A9400001267**

STERLING PROMENADES LIMITED PARTNERSHIP 3. Date Formed or Registered **5a.** Capital Contributions as Shown on record. Mailing Address Principal Office Address 303 ROYAL POINCIANA PLAZA 09/19/1994 303 ROYAL POINCIANA PLAZA \$540,000.00 PALM BEACH FL 33480 PALM BEACH FL 33480 3a. Date of Last Report 10/30/1995 **5b.** Amount of Capital Contributions in FLORIDA to date: 4. State or Country of Formation 2a. Principal Office Address FL Suite, Apt. #, etc. Suite, Apt. #, etc. 6. FEI Number Applied For 65-0519964 Not Applicable City & State 7. Certificate of Status Desired \$8.75 Additional Fee Required Country 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 KOSOY, A. DAVID 303 ROYAL POINCIANA PLAZA PALM BEACH FL 33480 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 office or 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) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. Flegistration/ 11. 11a. (Do NOT Use Post Office Box Numbers) Name(s) of General Partner(s) 11b. City, State & Zip Code 11c. 200 ROYAL PUINCIANAP 200 Phipps Plaza STERLING III FLORIDA, INC. PALM BEACH FL 33480 P94000067504 **102057733---1** 01/14/97--01162--019

CR2E003 (6/96)

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

1. 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 with Section 119.07(3)(k) in the event 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 calls. I further certify that I am a General Partner of the limited partnership, receiver or trusted empowered to execute this report as required by chapter \$20, Florida Statutes.

SIGNATURE

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SECRETARY OF STATE

TALLAHASSEE, FLORIDA