

**FILE ON OR BEFORE APRIL 9, 1997 TO AVOID REVOCATION
AND \$500 PENALTY FEE**

**LIMITED PARTNERSHIP
ANNUAL REPORT
1997**



FLORIDA DEPARTMENT OF STATE
Sandra Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 JUL 18 PM 2:20



1. Name of Limited Partnership
**1a. DOCUMENT #
A94000001272**

FIRST DARTMOUTH COMMERCIAL, LTD.

Mailing Address 6699 90TH AVE. N. PINELLAS PARK FL 34666		Principal Office Address 6699 90TH AVE. N. PINELLAS PARK FL 34666		3. Date Formed or Registered 09/20/1994	5a. Capital Contributions as Shown on record. \$2,088.00
2. Mailing Address		2a. Principal Office Address		3a. Date of Last Report 01/03/1996	5b. Amount of Capital Contributions in FLORIDA to date:
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. State or Country of Formation FL	
City & State		City & State		6. FEI Number 59-3269035	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip Country		Zip Country		7. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
8. Make check payable to: Dept. of State (See reverse side for fee information)					

9. Name and Address of Current Registered Agent BREIT, RICHARD H 3111 STIRLING ROAD FORT LAUDERDALE FL 33312		10. If changed, new Registered Agent/Office Name MARTIN E. RICE Street Address (P.O. Box Number is Not Acceptable) 335 THIRD AVE. N. Suite, Apt. #, etc. 3rd City ST PETERSBURG FL Zip Code 33701	
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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) *Martin E. Rice* DATE **7/16/97**

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

11. Name(s) of General Partner(s) DARTMOUTH DEVELOPMENT I, INC JORGE ECHARTE, JR., INC.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 5901 SUN BOULEVARD, S 5901 SUN BOULEVARD, S	11b. City, State & Zip Code ST. PETERSBURG FL 337 ST. PETERSBURG FL 337	11c. Registration/Document Number P93000027202 P94000067483
<p>400002243284--9 -07/21/97--01127--002 ****656.25 ****656.25</p> <p>REINSTATEMENT</p> <p>300 52.50 103.75</p> <p><i>dec</i></p>			

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

12. I do 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 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 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, Florida Statutes.

SIGNATURE

FRANK S. MCGRO, PRESIDENT

DATE

4/30/97

Typed or Printed Name of General Partner Signing Form

FRANK S. MCGRO, PRESIDENT, DARTMOUTH DEVELOPMENT I

Daytime Telephone Number

813-541-1100

CR2E003 (11/96)