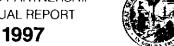
FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

*A9400000#371#

FILED SECRETARY OF STATE DIVISION OF CALEDON EDE

96 BEC 19 AM 9: 54

mlu 12/27

PLANTATION PROPERTIES, LTD.			C. seedan sava sami alam asin asin asin asin asin asin asin asin			
	Principal Office Address 1200 RIVERPLACE BLVD. SUITE 920 JACKSONVILLE FL 32202-3527		3. Date Formed or Registered 10/07/1994	Show	5a. Capital Contributions as Snews on record \$4,400,000.00	
JACKSONVILLE FL 32202-3527			3a 01/03/1996 ort			
			A State or County of Engage	Ocnil	urct of Capital abutions in FLORIDA ter	
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formatio	,,,		
Suite, Apt. #, etc.	Suite, Apt. #, etc		6. 5943273793		Applied For Not Applicable	
City & State	City & State		7. Certificate of Status Desired		Not Applicable [] \$8.75 Add bonal	
Z _i p Country	Zip Country				fiee Required	
			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			
F & L CORP. THE GREENLEAF BLDG., 200 LAURA ST. JACKSONVILLE FL 32202-3527		Name Street Address (P.O. Box Number Is Not Acceptable)				
		Suite, Apt #, etc				
		City		FL	Zip Code	
10a. Pursuant to the provisions of sections 620 1051 art for the purpose of changing its registered office or agent. Familiar with, and accept the obligation.	rregistered agent, or both, in the State of Flo-	ed limited partne rida. Such char	ge was authorized by its general partner(s)	I hereby accept the	ida, submits this statement appointment of registered	
SIGNATURE (Registered Agent Accepting Appointment) _ A GENERAL PARTNER THAT	IS A CORPORATION, L	IMITED		HER BUSI	NESS ENTITY	
MUS	T BE REGISTERED AN	D ACTIV	E WITH THIS OFFICE.	TIETT DOOL	NEGO ENTITI	
11. Name(s) of General Partner(s)	11a. (Do NOT Use Post Office B	nt Partner ox Numbers)	11b. City. State & Zip Code	11c.	Registration/ Document Number	
PLANTATION PROPERTIES CORPOR	1200 GULF LIFE DRIVE,		JACKSONVILLE FL 32207	Pt	P94000044787	
•			50000 -12/ ***	2029 277960 *578.25	6557 1077014 ****576. <i>2</i> 5	
Note: General partners MAY NO 12. I do hereby certify that the information supplied with Corporations from any liability of non-compliance with	this filing is voluntarily furnished and does no	of quality for the	exemption stated in Section 119 07(3)(k) Ft	onda Statutes i Freik	ase the Division of	

12. If 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 | Trelease 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 start have the same legal effects as if made under eath. I further certify that I am a General Partner of the I mitted partnership receiver or trustee empowered to execute this report as regularly cluster in 60° in foot a Statutes.

SIGNATURE .

yped or Printed Name of Outperal Partner Signing Form

James H. Dahl

DATE 12/14 196

Daytime Telephone Number 904 393 - 9020