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

LIMITED PARTNERSHIP
ANNUAL REPORT

1997

Typed or Printed Name of General Partner Signing Form \_



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

a, DOCUMENT # A94000001396 DIVISION OF CORPORATIONS

97 JAN 31 PM 12: 15



BREEN ISLE PARTNERS LTD., S.E.					T LOOVOUL LOUIS VENA THEIN SOURT BERNE DENIL SOURT BOLD LINGUS LINKO HEIND BILL LEDI.			
Mailing Address  4512-EAST BROWARD BOULEYARD, SUITE 301- FT. LAUDERDALE FL 53301		Principal Office Address  1512 EAST BROWARD SOULEVARD, SUITE SOI-		<del></del>	3. Date Formed or Registered 10/14/1994	5a. Capital Contributions as Shown on record \$22,875,000.00		
					3a. Date of Last Report 01/22/1996	5b. Amou	nt of Capital butions in FLORIDA	
2. Mailing Address 450 E. Las Olas Blvd.		2a. Principal Office Address 450 E. Las Olas Blvd.		,	4. State or Country of Formation	to date: 22,875,000.00		
Suite, Apt. #, etc. Suite 700		Suite, Apt. #, etc. Suite 700 City & State			6. FEI Number 65-0524813	Applied For Not Applicable		
City & State Ft. Lauderdale, FL		Ft. Lauderdale, FL			7. Certificate of Status Desired	\$8.75 Additional Fee Required		
Zip Country 33301		Zip Country 33301			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				
STIRK, ROBERT "1512 EAST BROWARD BOULEV "FT: LAUDERDALE FL 83301	450 E. Las Olas Blvd.		Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc.					
	Suite Ft. :	O 1 City	1 City FL Zip Code					
SIGNATURE (Registered Agent Accepting App  A GENERAL PARTNER	THAT IS	S A CORPORATION, I BE REGISTERED AN	LIMITED	PART	NERSHIP OR OTHI		NESS ENTITY	
11. Name(s) of General Partner(s)	111001	11a. (Do NOT Use Post Office		11b.	City, State & Zip Code	11c.	Registration/ Document Number	
Green ISLE - GP, LTD., S.E.		-1512 EAST BROWARD BOU- 450 E. Las Olas Blvd. Suite 700		FT	. Lauderdale fl <del>1999-</del> 3330	1	5000001958	
Note: General partners M	AY NOT I	pe changed on this form	n; an am	endme	****S	79701 76, 25	133024 ****576.25	
12. If do hereby certily that the information at Obrporations from any liability of non-cothis annual report is true and accurate a empowered to execute this report as rec	upplied with this npliance with S nd that my signa juired by chapte	filing is voluntarily furnished and does nection 119.07(3)(k) in the event that the liature shall have the same legal effects as	ot qualify for the	e exemption plied is dee	n stated in Section 119.07(3)(k), Florid med exempt from public access. I fur	a Statutes, I rele	ase the Division of he information indicated	

954-524-5336