

FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	--

FILED

98 JAN -2 PM 3: 53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



1. Name of Limited Partnership CITY CENTER ASSOCIATES, LTD.	1a. DOCUMENT # A94000001545 <i>98-AR CM</i> <i>\$ 541.25-FF</i> <i>8.75-CUS</i>
---	---

Mailing Address 100 2ND AVE. S., #201 ST PETERSBURG FL 33701	Principal Office Address 100 2ND AVE. S., #201 ST PETERSBURG FL 33701
---	--

3. Date Formed or Registered 11/17/1994	5a. Capital Contributions as Shown on record \$2,775,000.00
3a. Date of Last Report 01/07/1997	5b. Amount of Capital Contributions in FLORIDA to date:
4. State or Country of Formation FL 800002402748--6	6. FEI Number 59-3285127
7. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	8. Make check payable to: Dept. of State (See reverse side for fee information)

2. Mailing Address C/O DELMA PROPERTIES, INC. Suite, Apt. #, etc. 545 MADISON AVE, 17TH FL. City & State New York, NY Zip 10022 Country USA	2a. Principal Office Address Suite, Apt. #, etc. City & State Zip Country
--	--

9. Name and Address of Current Registered Agent BUILDER, J. LINDSAY JR. 390 N. ORANGE AVENUE, SUITE 1300 ORLANDO FL 32801	10. If changed, new Registered Agent/Office Name SCOTT BRAUNER C/O FISHER & SULLS, P.A. Street Address (P.O. Box Number Is Not Acceptable) 100 SECOND AVE. SOUTH, SUITE 701 City ST. PETERSBURG FL Zip Code 33701
---	---

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) _____

DATE 12/30/97

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)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/Document Number
CITY CENTER EQUITY CORP.	200 EAST ROBINSON STR	ORLANDO FL 32801	P94000004118
DELMA CITY CENTER CORP.	545 MADISON AVENUE, 1	NEW YORK NY 10002	F94000005910

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.

By: DELMA CITY CENTER *[Signature]*
SIGNATURE

DATE 12/22/97

Typed or Printed Name of General Partner Signing Form PATRICK D. BARRETT, ITS EMP

Daytime Telephone Number 212-355-4335

CR2E003 (6/97)