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 1a.

1a. DOCUMENT # **A94000001725**

IVY CHASE PARTNERSHIP, LTD.

FILED SECRETARY OF STATE DIVISION OF CORPORATION

95 DEC 30 PM 2: 55



					901/L		
Mailing Address 620 MAITLAND AVE		Principal Office Address 840 POINSETT DRIVE			3. Date Formed or Registered 12/12/1994	5a. Capital Contributions as Shown on record.	
ALTAMONTE SPRINGS FL 32701		COCOA FL 32922			3a. Date of Last Report 01/03/1996	5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Addres	2. Mailing Address 2a. Principa! Office Address				4. State or Country of Formation	#500.00	
Suite, Apt. #, etc. Suite, Apt. #, etc.					6. FEI Number 59-3287043	Applied For Not Applicable	
City & State Zip	Country	City & State Zip Country			7. Certificate of Status Desired	S8.75 Additional Fee Required	
	USS III Y				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			
KLING, ALICE L			Name				
620 MAITLAND AVE			Street Address (P.O. Box Number Is Not Acceptable)				
ALTAMONTE SPRINGS FL 32701			Suite, Apt. #, etc.				
			Chy FL Zip Code				
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		
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. (Do NOT Use Post Office B	(Partner ox Numbers)	11b.	City, State & Zip Code	11c. Registration/ Document Number	
UNITED PRO	PERTY GROUP, INC.	620 MAITLAND AVENUE		ALTAMONTE SPRINGS FL		S20549	
			30002 -01/08 ****1		3000021 -01/08/ ****15	0506637 /9701043017 91.25 ****191.25	
	·						
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner. 12 I do berefy certify that the information supplied with this filing is volvatatily furnished and does not qualify for the exemption stated in Section 119 07(3)(4). Shores Statutes Licies were Division of							

Corporations from any liability of non-compliance with Section 119.07(3)(x) 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 each. I further certify that I am a General Partner of the limited partnership, receiver or trustee

SIGNAŢURE

Ulice S. Kling

DATE 12/23/96

CR2E003 (6/96)