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

LIMITED PARTNERSHIP ANNUAL REPORT 1997



1994 VICTORIA SQUARE LIMITED PARTNERSHIP

FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

**DOCUMENT #** A94000001804

FILED SECRETARY OF STATE DIVISION OF COMPORATIONS

96 NOV -7 PH 3: 58



			3a. Date of Last Report 12/04/1995  4. State or Country of Formation	5b. Aniount of Capital Contributions in FLORIDA	
2. Mailing Address	2a. Principal Office Addres	2a. Principal Office Address		\$ 950,000	
Suite, Apt #, etc	Suite Apt. #, etc.			Applied For Not Applicable	
City & State	City & State			\$8.75 Additional Fee Required	
Zip Country	Zıp	Country	8. Make check payable to Dept	of State (See reverse side for fee information)	
9. Name and Addres	s of Current Registered Agent	Namie	10. If changed, new Registe	red Agent/Office	
565 KINGSLEY AVENUE ORANGE PARK FL 32075  10a. Pursuant to the provisions of sections 620 1051 and 620 192, Florida Statutes, the above for the purpose of changing its registered office or registered agent, or both, in the Stat		of Florida. Such change was authorized by its general partner(s). I he			
for the purpose of changing its register	ered office or registered agent, or both, in the State of			the State of Florida, submits this statement	
for the purpose of changing its registe agent. I am familiar with, and accept the SIGNATURE (Registered Agent Accepting App	ored office or registered agent, or both, in the State of the obligations of section 620, 192. Florida Statutes of the obligations of section 620, 192. Florida Statutes of the obligation of the section of the obligation of the o	of Florida Such change wa	s authorized by its general partner(s)   Fa	the State of Florida, submits this statement preby accept the appointment of registered $1/-1-96$	
for the purpose of changing its registe agent. I am familiar with, and accept the SIGNATURE (Registered Agent Accepting App	red office or registered agent, or both, in the State of the obligations of section 620, 192. Florida Statutes of the obligations of section 620, 192. Florida Statutes of the obligations of the obligatio	I, LIMITED PA	DAT  RTNERSHIP OR OTH  VITH THIS OFFICE.	the State of Florida, submits this statement preby accept the appointment of registered $1/-1-96$	
for the purpose of changing its registe agent. I am familiar with, and accept the SIGNATURE (Registered Agent Accepting Applications).	red office or registered agent, or both, in the State of the obligations of section 620.192. Florida Statutes continent) THAT IS A CORPORATION MUST BE REGISTERED	I, LIMITED PA AND ACTIVE V eneral Partner ce Box Numbers) 111	DAT  RTNERSHIP OR OTH  VITH THIS OFFICE.	the State of Florida, submits this statement preby accept the appointment of registered ER BUSINESS ENTITY	

empowered to execute this report as required by chapter 620, Florida Statutes

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 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 decreed 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

10-25-96

Typed or Printed Name of General Partner Signing Form \_ T. B. Latham III, President Daytone Telephone Number 918 254-8116