

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
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 DEC 29 AM 11:57

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1. Name of Limited Partnership	1a. DOCUMENT # A95000000969
217 PARTNERS LTD.	

Mailing Address 400 5TH AVENUE SOUTH, UNIT 301 NAPLES FL 33940	Principal Office Address 400 5TH AVENUE SOUTH, UNIT 301 NAPLES FL 33940	3. Date Formed or Registered 06/28/1995	5a. Capital Contributions as Shown on record. \$150,000.00
		3a. Date of Last Report 12/19/1996	
2. Mailing Address	2a. Principal Office Address	4. State or Country of Formation FL	5b. Amount of Capital Contributions in FL ORIDA to date: <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	6. FEI Number 65-0590053	
City & State	City & State	7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip Country	Zip Country	8. Make check payable to: Dept. of State (See reverse side for fee information)	

9. Name and Address of Current Registered Agent HEDGES, JAMES R IV 400 5TH AVENUE SOUTH, UNIT 301 NAPLES FL 33940	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code
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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) LJH GLOBAL INVESTMENTS, L.L.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 400 5TH AVENUE SOUTH,	11b. City, State & Zip Code NAPLES FL 33940	11c. Registration/Document Number M9400000018
600002396106--7 -01/08/98--01103--009 ***541.25 ***541.25			

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 20, Florida Statutes.

SIGNATURE *James R. Hedges IV*

DATE **12/24/97**

Typed or Printed Name of General Partner Signing Form: **JAMES R. HEDGES IV**

Daytime Telephone Number: **941 263 7445**

CR2E003 (6/97)