

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. Morham
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

97 OCT 29 AM 11:25



1. Name of Limited Partnership	1a. DOCUMENT # A95000001322
TAPLIN FALLS, LTD.	

Mailing Address 13651 NW 4TH ST. PEMBROKE PINES FL 33028		Principal Office Address 1001 SOUTH BAYSHORE DRIVE, SUITE 2100 MIAMI FL 33131		3. Date Formed or Registered 09/06/1995	5a. Capital Contributions as Shown on record. \$5,250,000.00
2. Mailing Address		2a. Principal Office Address		3a. Date of Last Report 11/01/1996	5b. Amount of Capital Contributions in FLORIDA to date.
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. State or Country of Formation FL	☐ Applied For ☐ Not Applicable 7. Certificate of Status Desired ☐ \$8.75 Additional Fee Required 8. Make check payable to: Dept. of State (See reverse side for fee information)
City & State		City & State		6. FEI Number 65-0607182	
Zip Country		Zip Country			

9. Name and Address of Current Registered Agent TAPLIN, JAY A ESQ. 1500 SAN REMO AVE., SUITE 220 CORAL GABLES FL 33131	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City
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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)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/Document Number
TAPLIN MEADOWS DEVELOPMENT C	1001 SOUTH BAYSHORE D	MIAMI FL 33131	P95000000335

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.

SIGNATURE _____

DATE

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

CR2E003 (6/97)