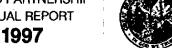
## FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP **ANNUAL REPORT** 



FLORIDA DEPARAMENT OF STATE

Sandra Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT\_#

FILED

96 NOV -4 PM 1: 53

SECRETARY OF STATE TALLAHASSEE, FLORIDA

	A95000001	A95000001925						
R. B. GREENE FAMILY F	PARTNERSHIP, LTD.	1-AR CM	F EKRANUHI URUD IDAUN DUNN DUNN DUNN DUNN DUNN DUNN DUNN	<b>.</b>      <b>.                              </b>	B) 11470 11810 11001 0111 1961			
Mailing Address 801 SOUTH SEMORAN BLVD. ORLANDO FL 32807	Principal Office Address  601 SOUTH SEMORAN BLVD.  ORLANDO FL 32807		3. Date Formed or Registered 12/08/1995	Shown	Contributions as on record.	-		
				5b. Amount of Capital		-		
2. Malling Address	2a. Principal Office Address	2a. Principal Office Address		5b. Amount of Capital Contributions in FLORIDA to date:		ا ا		
Suite, Apt. #, etc.	Sulte, Apt. #, etc.		6. FINANCIED FOR	Applied For Not Applicable				
City & State	City & State		59-3348838 7. Certificate of Status Desired			,		
Zip Country	Zip	Zip Country		7 • Certificate of Status Desired \$8.75 Additional Fee Required  8 • Make check payable to: Dept. of State (See reverse side for fee information)				
		<del></del>	10 6 1 1 2					
9. Name and Address LEFKOWITZ, IVAN M	10. If changed, new Registered Agent/Office							
430 NORTH MILLS AVENUE	i	RANDALI, B GREENE Street Address (P.O. Box Number Is Not Acceptable)						
ORLANDO FL 32803	i I	601 S Suite, Apt. •, etc.		Semoran Blvd				
		City Orlan	do	FL	Zip Code 32807			
for the purpose of changing its register	520,1051 and 620,192, Florida Statutes, the above-name and office or registered agent, or both, in the State of Florie obligations of section 620,192, Florida Statutes	ed limited partnersh	hip organized or registered under the laws of t					
SIGNATURE (Registered Agent Accepting Appl	Jana ()	) Jan	pano DATE	10/2	29/96	*		
A GENERAL PARTNER	THAT IS A CORPORATION, I MUST BE REGISTERED AN	LIMITED P	ARTNERSHIP OR OTHE WITH THIS OFFICE.	R BUSIN	IESS ENTITY			
11. Name(s) of General Partner(s) 11a. (Do NOT use Post Office Box I			1b. City, State & Zip Code	11c.	Registration/ Document Number			
R & D GREENE MANAGEMENT	CORP 601 SOUTH SEMORAN	BLV	ORLANDO FL 32807	P95	5000075732	(96/9)		
•			900002 -11/08 ****5	0002 /96010 76.25 *	797 044017 ****\$76.25	CB2F003 (6/96)		
		l				i		

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 fiting 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 119.97(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 acceptate and that my signature shall have the same legal elects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to electe this report is required by chapter 620. Floritia Stifutes. this annual report is true and accumpowered to execute this report,

SIGNATURE &

Typed or Printed Name of General Partner Signing Form

RANDALL B GREENE

Daytime Telephone Number