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

**ŁIMITED PARTNERSHIP** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

1997	WE WE THE	Secretary of State DIVISION OF CORPORATION	10	B-6 PM 4:21	
1. Name of Limited Partnership	<sup>1a.</sup> A950	1a.A95000001945			
BARTLEY INVESTMENTS	, LTD.		1		
Malling Address 3112 SOUTH JULIA CIRCLE TAMPA FL 33629-8814	12 SOUTH JULIA CIRCLE 3112 SOUTH JULIA CIRC		3. Date Formed or Registered 12/13/1995  3a. Date of Last Report 12/26/1995	52. Capital Contributions as Shown on record. \$5,000,000.00	
2. Mailing Address	<b>28.</b> Principal O	flice Address	4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:	
Suite, Apt. #, etc.	Suite, Apt. #, etc	Suite, Apt. #, etc.		Applied For	
City & State	City & State		59-3363349 7. Certificate of Status Desired	Not Applicable  \$8.75 Additional	
Zip Country	Zip	Country	8. Make check payable to: Dep	\$8.75 Additional Fee Required  t of State (See reverse side for fee information	
9. Name and Address	of Current Registered Agent		10. If changed, new Regis	ered Agent/Office	
BARTLEY, NEIL L		Name			
3112 SOUTH JULIA CIRCLE		Street Addr	ess (P.O. Box Number 19 Not. Carlat		
TAMPA FL 33629-8814		Suite Act	-02/12/9701036020		
			क्कक्कारा.८० क्कक्कारा.८०		
		City		FL Zip Code	
agent. I am familiar with, and accept the	ed office or registered agent, or both e obligations of section 570.197. Flo	n, in the State of Florida. Such chai rida Statutes.	nge was authorized by its general partner(s). I	of the State of Florida, submits this statement hereby accept the appointment of registered	
for the purpose of changing its registere	ed office or registered agent, or but e obligations of section of 0.197 Flo intment) Luy L THAT IS A CORPO	n, in the State of Florida. Such chairida Statutas.  Sartley PRATION, LIMITED	pge was authorized by its general partner(s). I	of the State of Florida, submits this statement hereby accept the appointment of registered	
for the purpose of changing its registere agent. I am familiar with, and accept the SIGNATURE (Registered Agent Accepting Appoi	ed office or registered age/it, or both e obligations of section 670.197 Flo intment)  THAT IS A CORPO MUST BE REGIST	n, in the State of Florida. Such chairida Statutas.  Sartley RATION, LIMITED ERED AND ACTIV	DARTNERSHIP OR OTHER WITH THIS OFFICE.	of the State of Florida, submits this statement hereby accept the appointment of registered ATE 136/86 HER BUSINESS ENTITY	
for the purpose of changing its registere agent. I am familiar with, and accept the SIGNATURE (Registered Agent Accepting Appoi	od office or registered agont, or both obligations of section (10.19). Florintment)  THAT ISA CORPO MUST BE REGIST  11a. (Do NO.	n, in the State of Florida. Such chairida Statutas.  Sartley PRATION, LIMITED	DARTNERSHIP OR OTH /E WITH THIS OFFICE.	of the State of Florida, submits this statement hereby accept the appointment of registered ATE	
for the purpose of changing its registere agent. I am familiar with, and accept the SIGNATURE (Registered Agent Accepting Appoi A GENERAL PARTNER 111. Name(s) of General Partner(s)	od office or registered agont, or both obligations of section (10.19). Florintment)  THAT ISA CORPO MUST BE REGIST  11a. (Do NO.	n, in the State of Florida. Such chairida Statutas.  PRATION, LIMITED ERED AND ACTIVES  OF EACH General Partner  F. Use Post Office Box Numbers)	DARTNERSHIP OR OTHER WITH THIS OFFICE.  11b. City, State & Zip Cede	of the State of Florida, submits this statement hereby accept the appointment of registered ATE    ATE	