FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

FILED

1999	DIVISION OF CO	PRPORATIONS	98 NFC 2	4 PM 2:30	
1. Name of Limited Partnership	1a. DOCUMENT # A9600000096		<u> </u>	SECRETARY OF STATE TALLAHASSEE, FLORIDA	
GRS ASSOCIATES, A LIMITED PARTNERSHIP					
Mailing Address 6511 ARLINGTON LN. PARKLAND FL 33067	Principal Office Address 6511 ARLINGTON LN. PARKLAND FL 33067		3. Date Formed or Registered 01/11/1996 3a. Date of Last Report 12/12/1997	5a. Capital Contributions as Shown on record. \$1,287.00 5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	to date: 1287.00	
Suite, Apt. #, etc. City & State	Suite, Apt. #, etc. City & State		6. FEI Number 65-0633677	Applied For Not Applicable	
Zip Country	Zip Country		Certificate of Status Desired Nake check payable to: Dept. of S	\$8.75 Additional Fee Required late (See reverse side for fee information)	
9. Name and Address of Current Registered Agent Name FRANKE, ARTHUR			10. If changed, new Registered	Agent/Office	
6511 ARLINGTON LN. PARKLAND FL 33067		Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc.			
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)					
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 (Do NOT Use Post Office Box		City, State & Zip Code	11c. Registration/ Document Number	
PFT PROPERTY MANAGEMENT, INC	-6971-NORTH FEDERAL HIW 6511 ARLINGTON LANE		BOCA RATON FL 33487- PANKLAND ドレ 33067 7000027 -01/13/1	P9600002826	
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner. 12. Ido 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.					

Typed or Printed Name of General Partner Signing Form ARTHUR