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

LIMITED PARTNERSHIP ANNUAL REPORT 1997



MEADOWS PARTNERS, LTD., LIMITED PARTNERSHIP

FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

A9600000339

FILED 96 OCT 30 111 2: 35 SECHETARY OF THATE TALLAHASSEE, FLORIDA

|--|--|

Mailing Address 4001 N. OCEAN BLVD., #1201	Principal Office Address 4001 N. OCEAN BLVD. #1201 BOCA RATON FL 33432	3. Date Formed or Rog stered 02/20/1996	5a. Capitel Contributions as Shown on record \$1,433,850.00	
BOCA RATON FL 33432		3a. Date of Last Report		
		4. State or Country of Formation	5b. An iourit of Capital Contributions in FLORIDA to date	
2. Mailing Address	2a. Principal Office Address	FL		
Suite, Apt # 1201 B	Suite, Apt. #, etc. Apt # 1201B	6. FEI Number	8411 Applied For Not Applicable	
City & State	City & State	7. Cert ficate of Status Desired	\$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 Curr	ent Registered Agent	10. If changed, new Registere	ed Agent/Office	
	Name			

3. Marile and Address of Cuttern Neglatered Agent	to a light, new negligible Agentionics
TUDORAN, STELA	Name
4001 N. OCEAN BLVD., #1201	Street Address (P.O. Box Number Is Not Acceptable)
BOCA RATON FL 33432	Sute Apr # etc # 17013
	City FL Zip Code

10a. Pursuant to the provisions of sections 620 1051 and 620 192. Florida Statutes, the above-named Inited 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 Floridal Such change was authorized by its general partner(s). Thereby accept the appointment of registered agent. Fam 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

	MIGST DE REGISTERED ARD ACTIVE WITH THIS OFFICE.					
11.	Name(s) of General Partner(s)	11a. (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number		
S	TELA TUDORAN, TRUSTEE	4001 N. OCEAN BLVD.,	BOCA RATON FL 33432			
G	REGORY TUDORAN, TRUSTEE	4001 N. OCEAN BLVD.,	BOCA RATON FL 33432			
•	,			13726123 9501019008 6.25 ****576.25		
				j		

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 filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes Tre-base the Division of Corporations from any liabilities non-compliance with Section 119 07(3)(k) in the event that the information supplied is decribed exempt from public accounts from 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 eath, I further certify that I am a General Partner of the limited partnership, receiver or trusted empowered to execute this eport as required by chapter 620. Florida Statutes

SIGNATURE -

Typed or Printed Name of General Partner Signing Form

10/25/26

Daytime Telephone Number