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

LIMITED PARTNERSHIP **ANNUAL** PEPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

. DOCUMENT # **A9600000419** 

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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VESTROADS, LTD.			i laeteki idik idiki eliki ediki ediki 	884H 884H 884H 80H 80H 87TTI HATA 18H TBU	
Mailing Address	Principal Office Address		3. Date Formed or Registered	58. Capital Contributions as Shown on record.	
4300 SOUTH U.S. 1. SUITE 203-342	4300 SOUTH U.S. 1. SUITE 203-342 JUPITER FL 33477		03/04/1996	\$1,350,000.00	
JUPITER FL 33477			3a. Date of Last Report	<b>4</b> 110001000-00	
			4	5b. Amount of Capital Contributions in FLORIDA to date:	
2. Mailing Address 222 U.S. Highway One	2a. Principal Office Address 222 U.S. Highway One		4. State or Country of Formation	to date.	
Suite Apt. #, etc. Suite 213-C	Suite Apt. #. etc. Suite 213-C		6. FEI Number	Applied For Not Applicable	
City & State Tequesta, FL	City & State Tequesta, FL	Tequesta, FL		\$8.75 Additional Fee Required	
Zip Country 33469	Zip Country 33469		8. Make check payable to: Dept.	of State (See reverse side for fee information	
9. Name and Address of Curre	ent Registered Agent	<u> </u>	10. If changed, new Register	red Agent/Office	
BOTHE, JOHN H		Name Da	Name Darlene Bothe		
4300 SOUTH U.S. 1, SUITE 203-342		Street Address (P.O. Box Number Is Not Acceptable)			
Jupiter FL 33477		222 U.S. Highway One, Suite 213-C Suite, Apt #, etc.			
		City Teques		FL Zip C333469	
10a. Pursuant to the provisions of sections 620 1051 for the purpose of changing its registered office agent. I am familiar with, and accept the obligation.	or registered agent, or both, in the State of	named limited partne if Florida. Such chang	rship organized or registered under the laws of ge was authorized by its general partner(s). I he	the State of Florida, submits this statement areby accept the appointment of registered	
SIGNATURE (Registered Agent Accepting Appointment)  A GENERAL PARTNER THA  MU:	T IS A CORPORATION		PARTNERSHIP OR OTH E WITH THIS OFFICE.		
11. Name(s) of General Partner(s)	11a. (Do NOT Use Post Office		11b. City, State & Zip Code	11c. Registration/ Document Number	
WESTROADS INVESTMENTS, INC.			**************************************	<b>P95000083552</b> 33469	
<b>\</b>				Q.	
<i>1</i> ′				3-10	
			800002 -03/1	21103488 1/9701117023	
Note: General partners MAY NO	OT be changed on this fo	orm; an ame	endment must be filed to cl	hange a general partner.	
12. I do hereby certify that the information supplied will Corporations from any liability of non-compliance withis annual report is true and accurate and that my empowered to execute this report as required by one of the control of the contro	with Section 119.07(3)(k) in the event that to y signature shall have the same legal effect	the information suppl	lied is deemed exempt from public access. I fu	rther certify that the information indicated on	
SIGNATURE LAKERE K	Bothe_		DATE	12-16-96	
Typed or Printed Namo of General Partner Signing Form.	Darlenor Both	le	Daytime Telephone Number	(561) 748-8865	