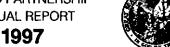
## FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership



FILED

96 DEC 12 AM 8: 49

SECRE LARY OF STATE TALLAHASSEE, FLORIDA



WOOLEY PR	ROPERTIES, LTD	<b>)</b> .			1 1000011 1000 10110 00111 00111 00111 00111 00111 00111 00111 00111 10111 10111 1011				
Mailing Address 8210 ADAMO DRIVE TAMPA FL 33619		Principal Office Address 9210 ADAMO DRIVE	•		3. Date Formed or Registered 03/25/1996		5a. Capital Contributions as Shown on record.		
INMEN PE SOCIO		INMITA IL SOCIE	INMER EL GOULB		38. Date of Last Report N/A		]		
							5b. Amount of Capital Contributions in FLORIDA		
2. Mailing Address	s	2a. Principal Office Address	2a. Principal Office Address		4. State or Country of Formation	to date:			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			6. FEI Number		Applied For		
City & State		City & State			59-3368000	Not Applicable			
City & State					7. Certificate of Status Desired		\$8.75 Additional Fee Required		
Zip	Country	Zip .	ip Country			8. Make check payable to: Dept. of State (See reverse side for fee informa			
<del></del>			-		40				
	9. Name and Address of Cur	rrent Registered Agent	Name		10. If changed, new Registere	d Agent/Office			
MURPHY, BAI 9210 ADAMO									
TAMPA FL 33	·		Street Address (P.O. Box Number is Not Acceptable)						
TAMEN TO CO	~ 10		Suite, Apt. (	, etc.					
		•	City			FL	Zip Code		
for the purpos	se of changing its registered offic	1 and 620.192, Florida Statutes, the above-na e or registered agent, or both, in the State of lations of section 620.192, Florida Statutes.				ne State of Flo			
SIGNATURE (Registere	ed Agent Accepting Appointment	l)			DATE				
A GENERA	AL PARTNER THA	AT IS A CORPORATION, IST BE REGISTERED A	LIMITED	PART /E WI1	NERSHIP OR OTHE TH THIS OFFICE.	R BUS	NESS ENTITY		
<b>11.</b> Name(s) of	General Partner(s)	11a. (Do NOT Use Post Office		11b.	City, State & Zip Code	11c.	Registration/ Document Number		
		9210 ADAMO DRIVE			MPA FL 33619	P96000025767			
	•								
					200002		199		

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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 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

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Typed or Printed Name of General Partner Signing Form

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12/5/96

Daytime Telephone Number (813) 621-7747

CH2E003 (6/96)