

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

LIMITED PARTNERSHIP
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

WL
11/15

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1. Name of Limited Partnership
396 LIMITED PARTNERSHIP

1a. DOCUMENT #
A96000000854

2. Mailing Address 400 Royal Palm Way Suite, Apt. #, etc. Palm Beach, FL 33480 Zip 33480 Country USA	2a. Principal Office Address 400 Royal Palm Way Suite 214 Palm Beach, FL 33480 Zip 33480 Country USA
Mailing Address C/O JONES, FOSTER, JOHNSTON & ALEXANDER 505 SOUTH FLAGLER DRIVE, SUITE 1100 WEST PALM BEACH FL 33401	Principal Office Address C/O JONES, FOSTER, JOHNSTON & ALEXANDER 505 SOUTH FLAGLER DRIVE, SUITE 1100 WEST PALM BEACH FL 33401

3. Date Formed or Registered 05/03/1996	5a. Capital Contributions as Shown on record \$1,665,000.00
3a. Date of Last Report	5b. Amount of Capital Contributions in FLORIDA to date \$1,665,000.00
4. State or Country of Formation FL	6. FEI Number 65-0677737 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent
ALEXANDER, LARRY B ESQ.
C/O JONES, FOSTER, JOHNSTON & ALEXANDER
505 SOUTH FLAGLER DRIVE, SUITE 1100
WEST PALM BEACH FL 33401

10. If changed, new Registered Agent/Office

Name
Larry B. Alexander, Esq.

Street Address (P.O. Box Number Is Not Acceptable)
505 S. Flagler Drive

Suite, Apt. #, etc.
Suite 1100

City
West Palm Beach

State
FL

Zip Code
33401

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) *[Signature]* DATE 9/12/96

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) 396 CORPORATION	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) -505 SOUTH FLAGLER DR- 400 Royal Palm Way Suite 214	11b. City, State & Zip Code -WEST PALM BEACH FL 33- Palm Beach, FL 33480	11c. Registration/ Document Number P96000038830
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***576.25 ***576.25

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.

SIGNATURE *[Signature]* DATE 11/8/96

Typed or Printed Name of General Partner Signing Form _____ Daytime Telephone Number _____

CR2E003 (6/96)