## FILE ON OR BEFORE APRIL 9, 1997 TO AVOID REVOCATION AND \$500 PENALTY FEE

## LIMITED PARTNERSHIP ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE Sandra Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

1. Name of Limited Partnership

**DOCUMENT #** A96000000943

SECRETARY OF STATE DIVISION OF CORPORATIONS

97 MAY 30 PH 1: 42



EALTY ASSET PROPERTIES, LTD.						
Malling Address  ATTN: RICHARD HEITMEYER  1700 PALM BEACH LAKES BLVD STE 1100	Principal Office Address  ATTN: RICHARD HEITMEYER 1700 PALM BEACH LAKES BLVD STE 1100 WEST PALM BEACH FL 33401			3. Date Formed or Registered 05/22/1996 38. Date of Last Report	\$9,900.00	
WEST PALM BEACH FL 33401				4. State or Country of Formation		
2. Mailing Address	Za. Principal Office Address	Za. Principal Office Address		FL		
Suite, Apt. #, etc.	Suite, Apt. #, etc.			6. FEI Number	Applied For	
City & State	City & State			7. Certificate of Status Desired		
Zip Country	Zip	Zip Country		8. Make check payable to: Dept. of State (See reverse side for fee information)		
9. Name and Address of Current	Registered Agent			10. If changed, new Registere	d Agent/Office	
CORPORATE SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301		Name CT CORPORATION SYSTEM  Street Address (P.O. Box Number Is Not Acceptable)  1200 B. PINE (SLAND ROAD)  Suite, Apt. #, etc.  City  PLANTATION  FL Zip Code 33324				
the purpose of changing its registered office or registered accept the obligations of sectors of the control of	ion 620.192, Florida Statutos.	m& LIMITED	PART	DATE NERSHIP OR OTHE		
11. Name(s) of General Partner(s)	Address of Each Con	erel Barteer	11b.	City, State & Zip Code	11c. Registration/ Document Number	
REALTY ASSET PROPERTIES GP.	11a. (Do NOT Use Post Office Box Numbers) 11 1700 PALM BEACH LAKES		WE	ST PALM BEACH FL 33	P96000089932	
				600002 -06/02 *****	1976869 2/9701083017 65.00 ****165.00	
	a			-06/02	1976869 /9701083018 *8.05 ******8.05	
Note: General partners MAY NOT		173.0	<del></del>	nt must be filed to ch	ange a general partner	
12. I do hereby certify that the information supplied with the Corporations from any liability of non-compliance with annual report is true and accurate and that my signate empowered to execute this report as required by chapters.	is filing is voluntarily furnished and does i Section 119.07(3)(k) in the event that the ire shall have the same legal effects as if	not qualify for the e information suppli	exemption s	stated in Section 119.07(3)(k), Florida see exempt from public access. I furthe	Statutes. I release the Division of ir certify that the information indicated on thi	
SIGNATURE OF	Il Author			DATE		
Typed or Printed Name of General Partner Signing Form				Daytime Telephone Number		