

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

1. Name of Limited Partnership

1a. DOCUMENT #
A96000001392

FIRST TEAM PREMIER, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 DEC 30 AM 10:35



CP 111

Mailing Address 350 S. LAKE DESTINY DRIVE, SUITE 200 ORLANDO FL 32801	Principal Office Address 350 S. LAKE DESTINY DRIVE, SUITE 200 ORLANDO FL 32801	3. Date Formed or Registered 07/25/1996	5a. Capital Contributions as Shown on record \$100,000.00
2. Mailing Address	2a. Principal Office Address	3a. Date of Last Report	5b. Amount of Capital Contributions in FLORIDA to date:
Suite, Apt. #, etc.	Suite, Apt. #, etc.	6. FEI Number 59-3392621	
City & State	City & State	7. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip	Country	8. Make check payable to: Dept. of State (See reverse side for fee information)	

9. Name and Address of Current Registered Agent HUMPHRIES, J. GREGORY 201 EAST PINE STREET, SUITE 701 ORLANDO FL 32801	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code
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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) _____ DATE _____
**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) FIRST TEAM MANAGEMENT, INC.	11a. Address of Each General Partner 350 S. LAKE DESTINY D	11b. City, State & Zip Code ORLANDO FL 32801	11c. Registration/ Document Number J22375
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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 19.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 19.07(3)(k) in the event that the information supplied is deemed necessary for 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.

First Team Management, Inc.

SIGNATURE

DATE 12/23/96

CR2E003 (6/96)