

**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

96 OCT 28 PM 3:40

1. Name of Limited Partnership

1a. DOCUMENT #
A96000001444

MGI FLAMINGO PALMS LIMITED PARTNERSHIP



Mailing Address

C/O MORGAN GROUP FLAMINGO PALMS, INC.
9801 WESTHEIMER, SUITE 1100
HOUSTON TX 77042

Principal Office Address

ATTN: MR. RONALD I. MORGAN
19707 TURNBERRY WAY, UNIT #22J
NORTH MIAMI BEACH FL 33180

3. Date Formed or Registered

08/02/1996

5a. Capital Contributions as
Shown on record

\$617,290.00

3a. Date of Last Report

5b. Amount of Capital
Contributions in FLORIDA
to date

617,290.00

4. State or Country of Formation

FL

2. Mailing Address

2a. Principal Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. FEI Number

Applied For
 Not Applicable

7. Certificate of Status Desired

\$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

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number Is Not Acceptable)

Suite, Apt. #, etc.

City

FL

Zip Code

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)

MORGAN GROUP FLAMINGO PALMS,

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

9801 WESTHEIMER, SUITE 1100

11b. City, State & Zip Code

HOUSTON TX 77042

11c. Registration/
Document Number

P96000053197

600001994656--9
-11/04/96-0013--003
***576.25 ***576.25

10-30

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

DATE

10/16/96

Typed or Printed Name of General Partner Signing Form

R. RONALD MORGAN

Daytime Telephone Number

CR2E003 (6/96)