## FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT# A96000001773

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 98 DEC 14 PM 4: 18

RISE TOWNCENTRE PARTNERS, LTD.	
--------------------------------	--

9. Name and Address of Current Registered Agent  10. If changed, new Registered Agent/Office  Name  Sheet Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  Toly  FL Zp Code  10a. Pursuant to the provisions of sections 820-1051 and 820-192, Florida Statutes, the above-named lanked partnership organized or registered under the laws of the Statu of Florida, submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by its general partner(p.) I hereby accept the appointment of registered agent, or both, in the State of Florida, Such change was authorized by its general partner(p.) I hereby accept the appointment of registered agent, or both, in the State of Florida, Such change was authorized by its general partner(p.) I hereby accept the appointment of registered Agent Acceptance (p. Inc.)  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND A CTIVE WITH THIS OFFICE.  11. Name(a) of General Partner(p.)  11. Name(b) of General Partner(p.)  11. Name(b) of General Partner(p.)  11. Only State Supplement Name of Agent Acceptable (p. Inc.)  12. Lob hearthy certify that the information supplied with his state (p. voluntarily furnished and does not qualify for the exemption stated in section 11907(3)(p.), Florida Statutes, I release the Division of Corporations from any liability of non-compliance with Section 11907(3)(p.) in the went that the Information supplied with a floridation indicated on this amount appear is the advention of the Mindew Section 11907(3)(p.) in the went that the Information supplied to deemed exempt from pulse the section 11907(3)(p.) in the went that the Informat	LARISE TOWNCENTRE PART	NERS, LTD.				
2. Mailing Address  28. Principal Office Address  28. Principal Office Address  50. Suite, Apt. #, etc.  50. Suite, Apt. #, etc.  50. Suite, Apt. #, etc.  60. Fill furnisher  65-0683100  71. Certificate of Status Desired  72. Certificate of Status Desired  73. Marine and Address of Current Registered Agent  10. If changed, new Registered Agent/Office  8. Marine Address of Current Registered Agent/Office  10. If changed, new Registered Agent/Office  Name  FRIED, MARK  200 WEST COMMERCIAL BLVD., SUITE 201-A  FORT LAUDERDALE FL 333099  50. Pursuant to the provisions of sections \$20.1651 and \$20.182, Florids Statutes, the above-named lamined partnership organized or registered under the laws of the Statut of Florids, submits this statement for the purpose of changing its registered Agent, or both, in the State of Florids, Such change was authorized by its general partnership.  10. For the purpose of changing its registered Agent, or both, in the State of Florids, Such change was authorized by its general partnership.  10. Agent and the provisions of sections \$20.1651 and \$20.162, Florids Statutes, the above-named lamined partnership organized or registered under the laws of the State of Florids, submits this statement for the purpose of changing its registered agent, or both, in the State of Florids, Such change was authorized by its general partnership. Investy accept the experiment of registered agent, and membership and accept the origination of registered agent Accepting Agent Accepting Partnership.  AGENERAL 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)  12. Lo burshy wordly that burshommetron supplied with this filing is voluntarily furthership and does not	2200 WEST COMMERCIAL BLVD., SUITE 201-A	2200 WEST COMMERCIAL BLVD., SUITE 201-A		09/23/1996 3a. Date of Last Report 01/02/1998	\$4,300,000.00 5b. Amount of Capital	
City & State  Country  Zip  Zip  Zip  Zip  Zip  Zip  Zip  Zi	2. Mailing Address		2a. Principal Office Address			
Zip   Country   Zip   Country   Zip   Country   Zip   State (Seatus Desired   \$8.75 Additional Residual Resid	Sulte, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			
Zip Country Zip Country Zip Country 8. Make check payable to: Dopt. of State (See reverse side for fee information 9. Name and Address of Current Registered Agent 10. If changed, new Registered Agent/Office  FRIED, MARK 2200 WEST COMMERCIAL BLVD., SUITE 201-A FORT LAUDERDALE FL 33309  FL Zip Code  10a. Pursuant to the provisions of sections \$20.1051 and \$20.192, Florida Statutes, the above-named lamined 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(6). I hereby accept the appointment of registered agent, or both, in the State of Florida, Such change was authorized by its general partner(6). I hereby accept the appointment of registered agent or collegation of section \$20.192, Florida Statutes.  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(a) of General Partner(s)  11a. Address of Each General Partner  11b. City, State & Zip Code  11c. Registration Document Number  LARISE TOWNCENTRE GP, INC.  2200 WEST COMMERCIAL  FORT LAUDERDALE FL 33  P96000077450  Note: General partners MAY NOT be changed on this form; an amendment must be filled to change a general partner.  12. Iso hareby credity test the information supplied with this filing is voluntarily furnished and does not causily for the exception shade in Section 1107(99), Florida Statutes. Inchess the Division of Corporations from any leading of non-corregilization with Section 11307(99), in the seven that the information supplied is deemed entered the Institute of the Rinday depression or this the information supplied is deemed entered from the Institute of the Rinday depression or this this many deemed entered the Institute of the Rinday depression or this this of the section 1107(199), in the accept and the information supplied is deemed entered to the Institu	City & State	City & State	City & State			
FRIED, MARK 2200 WEST COMMERCIAL BLVD., SUITE 201-A FORT LAUDERDALE FL 33309  10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the lists of the state of Florida, submits this sitatement for the purpose of changing its registered difference 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, and accept the objections of section 620.192, Florida Statutes.  SIGNATURE (Registered Agent Accepting Appointment)  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)  12. Address of Each General Partner  13. Address of Each General Partner  14. Name(s) of General Partner(s)  15. City, State & Zip Code  16. City, State & Zip Code  17. Pegisterior  17. DOUBLE FOR Office Box Numbers  18. City, State & Zip Code  19. City, State & Zip Code  19. City, State & Zip Code  11. Name(s) of General Partner(s)  18. City, State & Zip Code  19. City, State & Zip Code  19. City, State & Zip Code  11. Pegisterior  19. City, State & Zip Code  11. Pegisterior  11. Name(s) of General Partner(s)  12. Idea bereby certify that the information supplied with this filting is voluntarily furnished and does not qualify for the exemption state in Section 19.07(3)(k), Plorida Statutus, Telesaye the Orkiden of Corporations from any liebility of non-corregilence with Section 19.07(3)(k), Plorida Statutus, Telesaye the Orkiden of Corporations from any liebility of non-corregilence with Section 19.07(3)(k), Plorida Statutus, Telesaye the Orkiden of this annual second to the information supplied is deemed exempt from public access. In three certify that the information inclined partnership, section of the state of the information supplied is deemed exempt from the time of the information inclined in the information inclined in the info	Zip Country	Zip				
FRIED, MARK 2200 WEST COMMERCIAL BLVD., SUITE 201-A FORT LAUDERDALE FL 33309  10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the lists of the state of Florida, submits this sitatement for the purpose of changing its registered difference 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, and accept the objections of section 620.192, Florida Statutes.  SIGNATURE (Registered Agent Accepting Appointment)  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)  12. Address of Each General Partner  13. Address of Each General Partner  14. Name(s) of General Partner(s)  15. City, State & Zip Code  16. City, State & Zip Code  17. Pegisterior  17. DOUBLE FOR Office Box Numbers  18. City, State & Zip Code  19. City, State & Zip Code  19. City, State & Zip Code  11. Name(s) of General Partner(s)  18. City, State & Zip Code  19. City, State & Zip Code  19. City, State & Zip Code  11. Pegisterior  19. City, State & Zip Code  11. Pegisterior  11. Name(s) of General Partner(s)  12. Idea bereby certify that the information supplied with this filting is voluntarily furnished and does not qualify for the exemption state in Section 19.07(3)(k), Plorida Statutus, Telesaye the Orkiden of Corporations from any liebility of non-corregilence with Section 19.07(3)(k), Plorida Statutus, Telesaye the Orkiden of Corporations from any liebility of non-corregilence with Section 19.07(3)(k), Plorida Statutus, Telesaye the Orkiden of this annual second to the information supplied is deemed exempt from public access. In three certify that the information inclined partnership, section of the state of the information supplied is deemed exempt from the time of the information inclined in the information inclined in the info	Q Name and Address of Curre	nt Registered Agent	<del></del>	10. If changed, new Registere	d Agent/Office	
2000 WEST COMMERCIAL BLVD., SUITE 201-A FORT LAUDERDALE FL 33309  Suite, Apt. #. atc.  City  FL  Zip Code  FL  Z			Name			
City  FL Zip Code  10a. Pursuant to the provisions of sections 520.1051 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 effice or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(e). I hereby accept the appointment of registered agent agent. I am femilier with, and accept the obligations of section 620.192, Florida Statutes.  SIGNATURE (Registered Agent Accepting Appointment)  A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  11. Name(e) of General Partner(s)  11a. Agencia Statutes and Control Partner  11b. City, State & Zip Code  11c. Registration/ Document Number  11b. City, State & Zip Code  11c. Registration/ Document Number  11c. Registration/ Document Number  11d. Pontor LauderDale Ft 33  P96000077450  Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.  12. 1do 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-compiliance with Section 119.07(3)(k) in the event that the information supplied access. I further certify that the information indicated in this namel report is time and accurate. After the restrict what the information indicated in the information and receiver or the state of the other certify that the information indicated in the information indicated such shall have the series with Section 119.07(3)(k) in the event that the information applied is deemed exempt from public access. I further certify that the information indicated shall have the series as if made under each full further certify that the information indicated and the series as if made under each full fur	2200 WEST COMMERCIAL BLVD., SUITE 201-A					
10a. Pursuant to the provisions of sections \$20.1051 and \$20.192, 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 femiliar with, and accept the obligations of section 620.192, Florida Statutes.  SIGNATURE (Registered Agent Accepting Appointment)  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)  11a. Address of Each General Partner  (po NOT Use Post Office Box Numbers)  LARISE TOWNCENTRE GP, INC.  2200 WEST COMMERCIAL  FORT LAUDERDALE FL 33  P96000077450  ACCEPTAGE OF THE						
tor the purpose of changing its registered effect 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 familier with, and accept the obligations of section 620.192, Florida Statutes.  SIGNATURE (Registered Agent Accepting Appointment)  AGENERAL 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)  11a. Address of Each General Partner  Address of Each General Partner  11b. City, State & Zip Code  11c. Registration/ Document Number  11b. City, State & Zip Code  11c. Registration/ Document Number  11c. Pocument Number  11d. PORT LAUDERDALE FL 33  P96000077450  Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.  12. Ido 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 libability of non-compliance with Section 119.07(3)(k), I for even this annual report is true and accurate with Section 119.07(3)(k), I for index statutes. I release the Division of this norm any libability of non-compliance with Section 119.07(3)(k), I for index statutes. I release the Division of this norm any libability of non-compliance with Section 119.07(3)(k), I for index statutes. I release the Division of this normal report is true and accurate with the same local section 4 for the limited partnership, received or thus the same local section 4 for the limited partnership.			City		FL	
11. Name(s) of General Partner(s)  11a. Address of Each General Partner [Do NOT Use Post Office Box Numbers]  11b. City, State & Zip Code  11c. Registration/ Document Number  11b. City, State & Zip Code  11c. Registration/ Document Number  11c. Registration/ Document Number  11d. City, State & Zip Code  11c. Registration/ Document Number  11d. City, State & Zip Code  11c. Registration/ Document Number  11d. City, State & Zip Code  11d. Registration/ Document Number  12d. City, State & Zip Code  11d. Registration/ Document Number  12d. City, State & Zip Code  11d. Registration/ Document Number  12d. City, State & Zip Code  11d. Registration/ Document Number  12d. City, State & Zip Code  11d. Registration/ Document Number  12d. City, State & Zip Code  11d. Registration/ Document Number  12d. City, State & Zip Code  11d. Registration/ Document Number  12d. City, State & Zip Code  11d. Registration/ Document Number  12d. City, State & Zip Code  11d. Registration/ Document Number  12d. City, State & Zip Code  11d. Registration/ Document Number  12d. City, State & Zip Code  11d. Registration/ Document Number  12d. City, State & Zip Code  11d. Registration/ Document Number  12d. City, State & Zip Code  11d. Registration/ Document Number  12d. City, State & Zip Code  11d. Registration/ Document Number  12d. City, State & Zip Code  11d. Registration/ Document Number  12d. City, State & Zip Code  11d. City, State & Zip Code  11d. City, State & Zip Code  11d. Registration/ Document Number  12d. City, State & Zip Code  12d. City, State & Z	A GENERAL PARTNER THAT	I IS A CORPORATION, ST BE REGISTERED AN	LIMITED ID ACTI	PARTNERSHIP OR OTHE		
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 filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I release the Division of 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 truster		Address of Each Gener	al Partner	<del> </del>		
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 filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. Telease 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	LARISE TOWNCENTRE GP, INC.			FORT LAUDERDALE FL 33	P96000077450	
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 fruster.				400002 -12/2: *****	3/33801078002	
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 fruster.						
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 truster	Note: General partners MAY NO	T be changed on this for	m; an am	endment must be filed to ch	ange a general partner.	
SIGNATUREDATE	Corporations from any liability of non-compliance wi this annual report is true and accurate and that my s empowered to execute this report as required by or	th Section 119.07(3)(k) in the event that the interest that the interest in the same legal effects as	nformation supp if made under	illed is deemed exempt from public access. I furthe path, I further certify that I am a General Partner of	r certify that the information indicated on the limited partnership, receiver or trustee	
Timed or Printed Name of General Partner Signing Form 10 P /V47/000 Daytime Telephone Number 73/-766 35 00		Ros Malus	. JV.	Davtime Telephone Number	54-48-250C	