

**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

96 DEC 31 PM 3:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name of Limited Partnership
**Faison-International
Drive No. II, Ltd.**

1a. DOCUMENT #
A96000002302

Mailing Address

Principal Office Address

3. Date Formed or Registered

12/5/96

5a. Capital Contributions as
Shown on record

\$100.00

3a. Date of Last Report

5b. Amount of Capital
Contributions in FLORIDA
to date:

\$100.00

4. State or Country of Formation

FL

2. Mailing Address

2a. Principal Office Address

121 W. Trade St., Suite 1900

121 W. Trade St., Suite 1900

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Attn: Legal Dept.

Attn: Legal Dept.

City & State

City & State

Charlotte, NC XXXXX

Charlotte, NC XXXXX

Zip Country

Zip Country

28202

USA

28202

USA

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

**Mr. John M. Joyce
Suite 500
225 E. Robinson Street
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

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)

**FCD-International Drive
No. II, Ltd.**

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

**121 W. Trade St.,
Suite 1900**

11b. City, State & Zip Code

Charlotte, NC 28202

11c. Registration/
Document Number

A96000002303

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-01/10/97--01072--007
****191.25 ****191.25**

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

Asst. Secretary of Faison Capital

DATE

12/30/96

Development, Inc., general partner of FCD-International Drive No. II, Ltd.

Typed or Printed Name of General Partner Signing Form

Elizabeth M. Speed

Daytime Telephone Number

CR2ED03 (6/96)