FILE ON OR BEFORE DECEM WILL BE SUBJECT TO REVO				
LIMITED PARTNERSHIP ANNUAL REPORT 1997	FLORIDA DEPARTMENT OF STATE Sandra Mortham Secretary of State Division of Corporations		97 JAN 21 PM 3: 40 SECKETARY OF STATE TALLAHASSEE, FLORIDA	
Name of Limited Partnership		1a. DOCUMENT # A 9600002371		
Ericksen/Vanderbilt L	akes III, Ltd.			4212
awng Address 6318 Trail Blvd. Naples, Fl. 34108	Princ pai Office Address 6318 Trail Blvd. Naples, Fl. 34108		3. Date Formed or Registered 12/17/96 3a. Date of Lasi Report	5a. Capilal Contributions as Shown on record. \$60,900
Mailing Address	2a. Principal Office Address		A. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date:
suite, Apl. #, etc.	Suite, Apt. #, etc.		6. FEI Number	\$60,900 XX Applied For
Pite & State Country	City & State Zip	Country	7. Certificate of Status Desired 8. Make check payable to: Dept. o	State (See reverse side for fee informatic
9. Name and Address of Current Grover G. Eri C248. Two il De	icksen	Name NA Street Address (P.C	10. If changed, new Registere	d Agent/Olfice
6318 Trail Boulevard Naples, Fl. 34108		Suite, Apt. #, etc.		
Oa. Pursuant to the provisions of sections 620.1051 and for the purpose of changing its registered office on magerit. I am familiar with, and accept the obligations IGNATURE (Registered Agent Accepting Appointment).	egistered agent, or both, in the State of Flo of section 620 192, Florida Statutes.	ad limited parlnership or rida. Such change was	authorized by its general partner(s). I her	eby accept the appointment of registere
A GENERAL PARTNER THAT	S A CORPORATION, I			R BUSINESS ENTITY
MUST	BE REGISTERED AN	D ACTIVE W	ITH THIS OFFICE.	R BUSINESS ENTITY
MUST	BE REGISTERED AN	D ACTIVE W al Partner ox Numbers) 11b	Aples, F1. 3410 90002 -01/2	Inc. Registration/ Document Number 08 K08738 20 68479 24/97-01115-013
MUST 1. Name(s) of General Partner(s)	* BE REGISTERED AN Address of Each Genera (Do NOT Use Post Office Bo	D ACTIVE W al Partner ox Numbers) 11b	Aples, F1. 3410 90002 -01/2	11C. Document Number
MUST 1. Name(s) of General Partner(s) Ericksen Communities	BE REGISTERED AN 11a. Address of Each Genera (Do NOT Use Post Office Bo 6318 Trail Bl	DACTIVE W al Partner ox Numbers) 11b v d . Na	VITH THIS OFFICE. City. State & Zip Code Aples, Fl. 3410 900002 -01/2 *****	Inc. Registration/ Document Number 18 K08738 21068479
MUST 1. Name(s) of General Partner(s)	BE REGISTERED AN 11a. Address of Each Genera (Do NOT Use Post Office Bo 6318 Trail Bl be changed on this form is fling is voluntarily furnished and does no Section 119.07(3)(k) in the event that the ir gature shall have the same legal effects as	D ACTIVE W al Partner ox Numbers) 11b V d . Na n; an amendin ot qualify for the exemp normation supplied is d	ATH THIS OFFICE. City. State & Zip Code Aples, Fl. 3410 SCICICA -01/2 ***** tion stated in Section 119.07(3)(k). Florida leerned exempt from public access. I furth urther certify that I am a General Partner of	11c. Registration/ Document Number 08 K08738 21063473 4/9701115013 532.50 ####\$32.50 ange a general partner. Statutes. I release the Division of per certify that the information indicated of per certify the informa