'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 2:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name of Limited Partnership

HILGEMAN PROPERTIES, LTD.

1a. DOCUMENT #

A96000002436

Mailing Address	Principal Office Address
Unit No.2 6026 Taylor Road Naples, FL 33942	Unit No.2 6026 Taylor Road Naples, FL 33942
2. Mailing Address Same as above	**2a.** Principal Office Address Same as above
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country

3. Date Formed or Registered 12/24/96	**5a.** Capital Contributions as Shown on record. $877,000.00
3a. Date of Last Report Not Applicable	**5b.** Amount of Capital Contributions in FLORIDA to date
4. State or Country of Formation Collier	$877,000.00
6. FEI Number	X Applied For ☐ Not Applicable
7. Certificate of Status Desired	X **$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	**10.** If changed, new Registered Agent/Office
David L. Wolfe, Esq. 500 Fifth Avenue South Suite 509 Naples, Florida 34102	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)	**11a.** Address of Each General Partner (Do NOT Use Post Office Box Numbers)	**11b.** City, State & Zip Code	**11c.** Registration/ Document Number
RODERICK R. HILGEMAN	Unit No. 2 6026 Taylor Road	Naples, FL 33942	

CR2E003 (6/96)

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-01/10/97--01032--024
****585.00   ****585.00

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 _Roderick R. Hilgeman_   DATE December 30, 1996

Roderick R. Hilgeman, General Partner
Typed or Printed Name of General Partner Signing Form   Daytime Telephone Number (941)566-1616