

FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

**LIMITED PARTNERSHIP
ANNUAL REPORT
1998**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 NOV 13 PM 1:39

1. Name of Limited Partnership

1a. DOCUMENT #
A97000001104

FIRST AMERICAN AFFILIATES FUND I, LTD.

*nic 11/13/97
Advanced Title Services of Tallahassee, Ltd.*

Mailing Address

2807 REMINGTON GREEN CIRCLE
TALLAHASSEE FL 32308

Principal Office Address

2807 REMINGTON GREEN CIRCLE
TALLAHASSEE FL 32308

3. Date Formed or Registered

05/19/1997

5a. Capital Contributions as Shown on record

\$30,000.00

3a. Date of Last Report

N/A

5b. Amount of Capital Contributions in FLORIDA to date

\$30,000.00

4. State or Country of Formation

FL

6. FEI Number

59-3452496

☐ 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

OT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. If changed, new Registered Agent/Office

Name

John T. LaJoie

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

2807 Remington Green Circle

Suite, Apt. #, etc.

City

Tallahassee

FL

Zip Code

32308

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)

John T. LaJoie

DATE

10/29/97

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)

FIRST AMERICAN AFFILIATES, I

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

2807 REMINGTON GREEN

11b. City, State & Zip Code

TALLAHASSEE FL 32308

11c. Registration/Document Number

P97000039113

300002350623-8

-11/18/97-01057-013
******386.251****318.75**

de 11-17

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 118.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with section 118.07(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

Michael Conway

DATE

10/31/97

Typed or Printed Name of General Partner Signing Form

Michael Conway, President

Daytime Telephone Number

(850) 422-1540

CR2E003 (9/97)