## FILE ON OR REFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT

TO REVOSATION AN	D \$500 PENALTY FEE	LL DE OOL	JULU 1	
LIMITED PARTINE SITE ANNUAL RE 1998	DI ON CO	FINT OF STATE	DIVISION OF CO	ED OF STATE RPOR <b>ATIONS</b>
1. Name of Limited Partnorship  Laudings & Marci NA  Associates, LtD.	1a. DOCUMENT # A97000002191		98 JAN 27 A	M 10: 42
			BK 1/2	-7/9/
Mailing Address 1226 CommovCF St- Ft3as Dinhas TY 15202	Principal Office Address		3. Date Formed or Registered    0 9 9 7  3a. Date of Last Report	5a. Capital Contributions as Shown on record.  \$ 990.00  5b. Amount of Capital Contributions in FLORIDA
2. Mailing Address Same us Abae Suite, Apt. #, etc.	Principal Office Address Suite, Apl. #, etc.	wel	4. State or Country of Formation FLorida 6. FEI Number	to date:
City & State	City & State		72-2130 7. Certificate of Status Desired	Not Applicable  \$8.75 Additional
Zip Country	Zip	Country	8. Make check payable to: Dept. of	Fee Required  State (See reverse side for fee information)
9. Name and Address of Current Re	egistered Agent		10. If changed, new Registered	Agent/Office
Corporation Service Company street		Suite, Apt. #, e	*****155.25 *****155.25	
10a. Pursuant to the provisions of sections 620 1051 and 63 for the purpose of changing its registered office or reg agent. I am familiar with, and accept the obligations of	20.192, Florida Statules, the above-named	da Such change		by accept the appointment of registered
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	11b. City, State & Zip Code	11c. Registration/ Document Number
Investors 2 Landings associates, Anc.	1224 Commarce #300	SA:	Dallos, TX 75202	P97600089961
•			1/27/9x	
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.				
12. I calhereby certify that the information supplied with this Co porations from any liability of non-compliance with Se thir annual report is true and accurate and that my signal empowered to execute this report as required by chapter.	ction 119.07(3)(k) in the event that the info ture shall have the same legal effects as if	ormation supplied made under oat	d is deemed exempt from public access. I furthe th, I further certify that I am a General Partner of t	r certify that the information indicated on he limited partnership, receiver or trustee
SIGNATURE	Double		DATE	2/20/97
Typed or Printed Name of General Partner Signing Form			Daytime Telephone Number	4 141-7070