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

1. Name of Limited Partnership

DOCUMENT# B9300000427

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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150 WEST BRAMBLETON AVENUE NORFOLK VA 23510 2. Mailing Address 2. Mailing Address 2. Principal Office Address 2. Mailing Address 2. Principal Office Address 2. Suite, Apt. #, etc 3. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1. 1201 HAYS ST STE 105 TALLAHASSEE FL 32301 City O. Pursuant to the provisions of sections 620 1051 and 620 192 Floridal Statutes, the above-named limited print the purpose of changing its registered office or registered agent on both, in the State of Floridal Such agent 1 am familiar with and accept the obligations of section 620 192. Floridal Statutes IGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION, LIMITE MUST BE REGISTERED AND ACT 1. Name(s) of General Partner(s) 1. Name(s) of General Partner(s) 1. Name(s) of General Partner(s) 1. 150 WEST BRAMBLETON A	#. etc *** #. etc *** #. etc *** #. etc ** #. etc *	Applied For Not Applied For Not Applied For Not Applicable ired \$8.75 Additional Fee Required Dept of State (Scoreverse side for lee information of State (Score
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	110711 021 VA 20010	P33474
		MANA
Note: General partners MAY NOT be changed on this form; an a	endment must be filed t	o change a general partne
 I do hereby certify that the information supplied with this filling is voluntarly furnished and does not qualify for Corporations from any liability of non-compliance with Section 119 07(3)(k) in the event that the information is this annual report is true and accurate and that my signature shall have the same legal effects as if made un empowered to execute this report as required by chapter 620. Find a Stafules. 	iplied is openied exempt from public acce r oath. I lurther certify that I am a General	ss. I further certify triat the information indicated