FILE ON OR BEFORE APRIL 9, 1997 TO AVOID REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

FILED
SECRETARY OF STATE

1997	Secretary of DIVISION OF CORE		1	JURPURATIONS	
1. Name of Limited Partnership	1a. DOCUMEI B940000001	1a. DOCUMENT # B9400000144		97 APR -9 PM 4: 20	
SOWAMCO VIII, LTD.				011	
Mailing Address P.O. BOX 8216 WACO TX 76714	Principal Office Address 6400 IMPERIAL DRIVE WACO TX 76714 28. Principal Office Address		3. Date Formed or Registered 04/13/1994 38. Date of Last Report	58. Capital Contributions as Shown on record.	
2. Mailing Address			11/07/1995 4. State or Country of Formation TX	5b. Amount of Capital Contributions in FLORIDA to date:	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			Applied For	
City & State Zip Country	City & State	ountry	7. Certificate of Status Desired	Not Applicable \$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 C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City Zip Code			
I am familiar with, and accept the obligations of some SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT	TIS A CORPORATION, LIF	MITED PAR	NERSHIP OR OTHE	R BUSINESS ENTITY	
11. Name(s) of General Partner(s)	ST BE REGISTERED AND 11a. Address of Each General Part (Do NOT Use Post Office Box N		City, State & Zip Code	11c. Registration/ Document Number	
SOWAMCO VIII OF TEXAS, INC.	6400 IMPERIAL DRIVE	J	ACO TX 76714	F94000001890	
-			8000C -04, ***	02142688 714/9701159005 **156.25 ****156.25	
Note: General partners MAY NO	T be changed on this form;	an amendme	ent must be filed to ch	ange a general partner.	
12. I do hereby certify that the information supplied with Corporations from any liability of non-compliance wi annual report is true and accurate and that my signs empowered to execute this report as required by ch	ith Section 119.07(3)(k) in the event that the informature shall have the same legal effects as if made	nation supplied is deer	ned exempt from public access. I furthe	r certify that the information Indicated on this	
SIGNATURE May	Kay			-31-97	
Typed or Printed Name of General Partner Signing Form	Margie Kay- S	166,	Daytime Telephone Number	317-751-1750	