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

LIMITED PARTNERSHIP **ANNUAL REPORT** 1998



ANNA MARIA ASSOCIATES, LIMITED PARTNERSHIP

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # **B9400000190**

SECRETARY OF STATE DIVISION OF CORPORATIONS

98 JAN -5 AMII: 02





Mailing Address 570 DELAWARE AVENUE BUFFALO NY 14202	RE AVENUE 570 DELAWARE AVENUE		3. Date Formed or Registered 05/24/1994 3a. Date of Last Report 12/18/1996 4. State or Country of Formation	5a. Capital Contributions as Shown on record. \$9,900.00 5b. Amount of Capital Contributions in FLORIDA to date:
2. Malling Address	2a. Principal Office Address		NY	9900.00
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 16-1451248	Applied For
City & State	City & State	•		Not Applicable \$8.75 Additional Fee Required
Zip Country	Zip	Country	8. Make check payable to: Dept. of	State (See reverse side for fee information)
9. Name and Address of Current R	legistered Agent		10. If changed, new Registere	d Agent/Office
CORPORATION SERVICE COMPANY		Name Street Address (P.O. Box Number 15 Not Agraphable) 2 4 7 3 5 2 3 8 1/21/38 01105 025		
1201 HAYS STREET				
TALLAHASSEE FL 32301-2525				56.25 ****156.25
		City		FL Zip Code
Pursuant to the provisions of sections 620.1051 and for the purpose of changing its registered office or reagent. I am familiar with, and accept the obligations of SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT I MUST	gistered agent, or both, in the State of Flori of section 620.192, Florida Statutes.	ida. Such change	was authorized by its general partner(s). I her DATE ARTNERSHIP OR OTHE	eby accept the appointment of registered
11. Name(s) of General Partner(s)	11a. Address of Each General	Partner x Numbers)	1b. City, State & Zip Code	11c. Registration/ Document Number
BENDERSON-MANATEE, L.C.	570 DELAWARE AVENUE		BUFFALO NY 14202	L9300000382
Note: Coperal partners MAY NOT	he changed on this form	r an amen	dment must be filed to ch	ange a general partner

12. I do hereby certify that the information supplied with this fiting 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 nis **report as required by** chapter 620, Florida Statutes.

BALDAUT

DATE 12/31/97