## 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

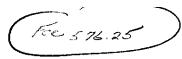
Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

**DOCUMENT #** B9400000515

CARROLLWOOD PLACE LIMITED PARTNERSHIP

SIGNATURE TCR North Florida Apts, Inc. Typod or Printed Name of General Partner Signing Form Douglas A.



- N96 MOV 25" AM 9: 28 358



Suite, Apt. #, etc. S City & State Country 2  9. Name and Address of Current Regis HOEKSEMA, DOUGLAS 541 S. ORLANDO AVENUE, SUITE 210 MATTLAND FL 32751	541 S. ORLANDO AVENUE SUITE 210 MAITLAND FL 32751  2a. Principal Office Address Suite, Apt. #, etc.  City & State Zip  stered Agent	Country  Name Street Address	12/21/1994  3a. Date of Last Report 01/26/1996  4. State or Country of Formation TX  6. FEI Number 75-2568861  7. Certificate of Status Desired  8. Make check payable to: Dept.	5b. Amou Contributed at 2,6	Applied For Not Applicable  \$8.75 Additional Fee Required			
2. Mailing Address  Suite, Apt. #, etc.  City & State  Zip  Country  2  9. Name and Address of Current Regis  HOEKSEMA, DOUGLAS  541 S. ORLANDO AVENUE, SUITE 210  MAITLAND FL 32751	<b>2a.</b> Principal Office Address Suite, Apt. #, etc. City & State	Name	01/26/1996  4. State or Country of Formation TX  6. FEI Number 75-2568861  7. Certificate of Status Desired  8. Make check payable to: Dept.	Contr to dat 2,6	Applied For Not Applicable  \$8.75 Additional Fee Required			
Suite, Apt. #, etc.  City & State  Zip  Country  2  9. Name and Address of Current Regis  HOEKSEMA, DOUGLAS  541 S. ORLANDO AVENUE, SUITE 210  MAITLAND FL 32751	Suite, Apt. #, etc. City & Stale Zip	Name	TX 6. FEI Number 75-2568861 7. Certificate of Status Desired 8. Make check payable to: Dept.	to dat 2,6	Applied For Not Applicable  \$8.75 Additional Fee Required			
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9. Name and Address of Current Regis HOEKSEMA, DOUGLAS 541 S. ORLANDO AVENUE, SUITE 210 MAITLAND FL 32751		Name		<u>"</u>	Fee Required			
HOEKSEMA, DOUGLAS 541 S. ORLANDO AVENUE, SUITE 210 MAITLAND FL 32751	stered Agent		10. If changed, new Register	red Agent/Office				
HOEKSEMA, DOUGLAS 541 S. ORLANDO AVENUE, SUITE 210 MAITLAND FL 32751	slered Agent		10. If changed, new Register	red Agent/Office				
541 S. ORLANDO AVENUE, SUITE 210 MAITLAND FL 32751					10. If changed, new Registered Agent/Office Name			
			Street Address (P.O. Box Number is Not Acceptable)					
100 Days the last the second se		Suite, Apt. #, etc						
10a. Pursuant to the provisions of sections 620.1051 and 620		City		FL	Zip Code			
A GENERAL PARTNER THAT IS A MILET R			PARTNERSHIP OR OTHI WITH THIS OFFICE.		NESS ENTITY			
11. Name(s) of General Partner(s)	11a. (Do NOT Use Post Office	and Distance	11b. City, State & Zip Code	11c.	Registration/ Document Number			
TCR CARROLLWOOD PLACE LIMITE	541 S. ORLANDO AVENUE				4000000514			
			600002 -12/0 ****	2022( 67960 576.25	5761 1094010 ****576.25			
Note: General partners MAY NOT be  12. I do hereby certily that the information supplied with this fill Corporations from any liability of non-compliance with Sections are lail report is true and accurate and that my signature.	ing is voluntarily furnished and does ion 119 07(3)(k) in the event that the	s not qualify for the exe information supplie	xemption stated in Section 119 07(3)(k), Florid d is deemed exempt from public access. I fur	la Statutes. Frele ther certify that t	ase the Division of he information indicated on			

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