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

LIMITED PARTNERSHIP ANNUAL REPORT 1997

Typed or Printed Name of General Partner Signing Form



DEVON/BRADENTON LIMITED PARTNERSHIP

FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. DOCUMENT # **B9600000042** 

## FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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		· · · · · · · · · · · · · · · · · · ·	3_ Date Formed or Registered	5a. Capita	al Contributions as
iling Address 1000 POWELL STREET, SUITE 1240	Principal Office Address  2000 POWELL STREET, SUITE 12	40	01/26/1996	Shown on record.	
EMERYVILLE CA 94508	EMERYVILLE CA 94608		· ' '		
				5b. Amou	int of Capital Ibutions in FLORIDA
. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	to dat	le:
uite, Apt. #, etc.	Suite, Apt. #, etc.		CA	<u> </u>	
	<u> </u>		6. FEI Number		Applied For
ity & State	City & State		7. Certificate of Status Desired	F\	Not Applicable \$8.75 Additional
ip Country	Zip	Zip Country		Fee Required  8. Make check payable to: Dept. of State (See reverse side for fee informat	
			G. Make theor payable to bept. of t	0410 (040 1446	The diod for the lift of the l
9. Name and Address of Currer	nt Registered Agent	10. If changed, new Registered Agent/Office			
CORPORATION SERVICE COMPANY		1000021378 <u>8</u> 14			
1201 HAYS STREET TALLAHASSEE FL 32301		Street Address (P.O. Box Number is Not Acceptate 4/09/9701071009			
		Sulte, Apt. #, etc.			
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Daytime Telephone Number