## FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT

1997



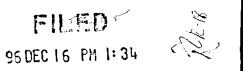
FLORIDA DEPARTMENT OF STATE

## Sandra Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Parlnership

**DOCUMENT#** B96000000332



SECKETARY OF STATE TALLAHASSEE, FLORIDA



Vinings Club at Metro	West Limited Partner	ship					
Maing Address	Principal Office Address	3. Date Formed	or Registered	5a. Capital Shown	<b>5a.</b> Capital Contributions as Shown on record		
541 S. Orlando Ave. 541 S. Orlando Suite 210 Suite 210		wr.	8/23/1	8/23/1996 5,260		60,000,00	
			3a. Date of Last	3a. Date of Last Report			
Maitland, FL 32751	Maitland, FL 327	maittand, FL 32/31		.996	5b. Amount of Capital Contributions in FLORIDA		
2	20.0		4. State or Count	ry of Formation	to date		
2. Mailing Address	<b>2a.</b> Principal Office Address	Za. Principal Office Address			TX 5,260,000.00		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number ☐ Applied For 75-2664941 ☐ Not Applicable			
City & State	City & State	City & State				- }	
				Status Desired			
Zip Country	Zip			Fee Required  8. Make check payable to Dept of State (See reverse side for fee information			tor)
9. Name and Address of Current Registered Agent		Name	10. If chang	ed. new Registero	d Agent/Office		
Washama Danalan A							
Hoeksema, Douglas A. 541 S. Orlando Ave.		Street Addr	Street Address (P.O. Box Number   MADD     12   13   4   5   13   5   5   5   5   5   5   5   5   5				
Suite 210		Suite, Apt	, etc		576.25	****576.2	5
Maitland, FL 32751		City	City			FL Zip Code	
SIGNATUFIE (Registered Agent Accepting Appointment)  A GENERAL PARTNER THA	T IS A CORPORATION, ST BE REGISTERED AI	LIMITED	PARTNERSHIP	OR OTHE		IESS ENTIT	Y
11. Name(s) of General Partner(s)	11a. Address of Each Gene (Do NOT Use Post Office	16	11b. City. State & 2		11c.	Registration/ Document Number	$\dashv$
TCR MetroWest Limited Partnership	541 S. Orlando Suite 210		Maitland, F	. 32751	в9600	00000320	CR2ED03 (6/96)
, 			l				_
Note: General partners MAY NO							<u>:</u>
12. I do hereby certify that the information supplied with Corporations from any liability of non-compliance this annual report is frue and accurate and that my empowered to execute this report as required by TCR MetroWest I SIGNATURE TCR Metro, Inc.	with Section 119 07(3)(k) in the event that the y signature shall have the same legal effects chapter 620, Florida Statutes.	information suppass if made under	the discrete description of the state of the description of the state	ublic access. I furth a General Partner o	ner certify that th of the limited par	e information indicated thership, receiver or tru	
Typed or Printed Name of General Partner Signing Form	Joon C Lano	wick	Daytime Telep	hone Number #	7-973	-6126	