

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 Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 DEC 24 AM 10:43

1. Name of Limited Partnership TCR WELLINGTON LIMITED PARTNERSHIP		1a. DOCUMENT # B96000000 363	
2. Mailing Address 6400 Congress Ave. Suite 2000 Boca Raton, FL 33487		2a. Principal Office Address 6400 Congress Ave. Suite 2000 Boca Raton, FL 33487	
3. Date Formed or Registered 9/19/96		5a. Capital Contributions as Shown on record 99.00	
3a. Date of Last Report		5b. Amount of Capital Contributions in FLORIDA to date 0	
4. State or Country of Formation TX		6. FEI Number 75-2671766	
7. Certificate of Status Desired <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable		8. Make check payable to: Dept. of State (See reverse side for fee information)	

9. Name and Address of Current Registered Agent Deborah L. Fish 6400 Congress Ave., Suite 2000 Boca Raton, FL 33487	10. If changed, now Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code
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10a. Pursuant to the provisions of sections 620.1081 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) Deborah L. Fish DATE 9/23/96

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s) TCR SFA Wellington, Inc.	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 6400 Congress Ave	11b. City, State & Zip Code Boca Raton, FL 33487	11c. Registration/Document Number B96000000 363 F96000000 4827 100002046441--7 -01/06/97--01/021--011 ****191.25****191.25 1231
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Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing 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, empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE Deborah L. Fish DATE 9/23/96
Typed or Printed Name of General Partner Signing Form Deborah L. Fish, Asst. Sec. Daytime Telephone Number 407/997-9700

CR2E003 (6/96)