FILE ON OR BEFORE APRIL 7, 1999 TO AVOID REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED

99 APR -6 PH 1:48

SECRETARY OF STATE TALLAHASSEE, FLORIDA

1. Name of Limited Partnership 1a. DOCUM B9800000					I Cl
MILAN - TEMPLE TERRACE F	PROPERTIES, LTD.			56'44 5544 6 444 5844 5644 6644 6846 6846 6	
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record]_
111 EAST 61ST STREET NEW YORK NY 10021	8035 EAST R.L. THORNTON FREEWAY, STE. 420 DALLAS TX 75228		01/23/1998 3a. Date of Last Report	\$990.00	=
2. Mailing Address	2a. Principal Office Address	,a.,	4. State or Country of Formation	5b. Amount of Capital Contributions in FLORIDA to date	121
			TX 6. FEI Number	0	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		Applied For	
City & State	City & State		75 - 25 3 0 : 7. Certificate of Status Desired		
Zip Country	Zip Co	ountry	ì	\$8.75 Additional Fee Required State (See reverse side for fee informatio	n)
9. Name and Address of Current Registered Agent		Name	10. If changed, new Registered	Agent/Office FF ¶ Y	25
C T CORPORATION SYSTEM		Street Address (P.O. Box Number Is Not Acceptable)			
1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324					
		Suite, Apt #, etc			_ -
for the purpose of changing its registered office or n agent. I am familiar with, and accept the obligations SIGNATURE (Registered Agent Accepting Appointment)	of section 620 192, Fiorida Statutes		DATE		_
A GENERAL PARTNER THAT MUS	IS A CORPORATION, LII T BE REGISTERED AND	MITED PAI ACTIVE W	RTNERSHIP OR OTHE /ITH THIS OFFICE.	ER BUSINESS ENTITY	
11. Name(s) of General Partner(s)	11a. (Do NOT Use Post Office Box Nu		Cily State & Zip Code	11c. Registration/ Document Number	
SOMMERSET REALTY INVESTMENT	111 EAST 61ST STREET		NEW YORK NY 10021	F9800000415	CR2E003 (12/98)
				11.9	R2E00
4			100002 -04/14 *****	\$382017 \$382017 \$41,28 ****141.28	,
			न क∘रकः ∫	11.25	
Note: General partners MAY NOT	be changed on this form:	∟ an amendm	ent must be filed to cha	nge a general partner.	-
12. I do hereby certify that the information supplied with this from any liability of non-compliance with Section 119.0 is true and accurate and that my signature shall have execute this report as required by chapter 620. Florida	7(3)(k) in the event that the information supplied he same legal effects as if made under oath. I fu	is deemed exempt f	rom public access. I further certify that the	information indicated on this annual repo	
SIGNATURE April T.		~		1/31/99	-
Typed or Printed Name of General Partner Signing Form			Daytime Telephone Number		