

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

FILED

97 MAR 17 AM 11:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED PARTNERSHIP ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra Mortham Secretary of State DIVISION OF CORPORATIONS
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1. Name of Limited Partnership	1a. DOCUMENT # A12188
BAHIA MAR ASSOCIATES, LIMITED	



Mailing Address 122 E. 42ND ST. 49TH FLOOR NEW YORK DERDALE NY 10168	Principal Office Address 122 E. 42ND ST. 49TH FLOOR NEW YORK DERDALE NY 10168
2. Mailing Address	2a. Principal Office Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State New York NY	City & State New York NY
Zip 10168	Zip 10168

3. Date Formed or Registered 03/02/1982	5a. Capital Contributions as Shown on record. \$730,000.00
3a. Date of Last Report 03/26/1996	5b. Amount of Capital Contributions in FLORIDA to date:
4. State or Country of Formation FL	
6. FEI Number 59-2620376	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
7. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
8. Make check payable to: Dept. of State (See reverse side for fee information)	

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION FL 33324	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code
10a. Pursuant to the provisions of sections 620.1051 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) _____ DATE _____	

**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) BAHIA MAR PROPERTIES, INC	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 122 E. 42ND ST. 49TH	11b. City, State & Zip Code NEW YORK NY 10168	11c. Registration/Document Number 851945
000002118340--5 -03/19/97--01110--004 ****541.25 ****541.25			
dec 541.25 (new bus)			

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 *Kenn E Barker* DATE **2/28/97**
Typed or Printed Name of General Partner Signing Form **Chairman, Bahia Mar Properties, Inc. C.P.** Daytime Telephone Number

CR2E003 (11/96)