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

LIMITED PARTNERSHIP ANNUAL REPORT

1997

CARROLLWOOD CENTER, LTD.



FLORIDA DEPARTMENT OF STATE

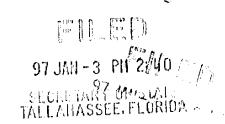
Sandra Mortham

Secretary of State
DIVISION OF CORPORATIONS

1. Name of Limited Partnership

1a. A16441

A16441





Mailing Address 10033B NORTH DALE MABRY HIGHWAY TAMPA FL 33618		Principal Office Address 10033B NORTH DALE MABRY HIGHWAY TAMPA FL 33618		3. Date Formed or Registered 02/16/1984 3a. Date of Last Report 10/18/1995 4. State or Country of Formation FL	5a. Capital Contributions as Shown on record. \$2,625,000.00 5b. Amount of Capital Contributions in FLORIDA to date:
2. Mailing Address		2a. Principal Office Address			
Sulte, Apt. #, etc.		Suite, Apt #, etc.		6. FLI Number 59-2378165	Applied For Not Applicable
City & State		City & State		7. Certificate of Status Desired	\$8.75 Additional Fee Required
Zip	Country	Zip Country		8. Make check payable to: Dept. of State (See reverse side for fee information	
	9. Name and Address of Current	Registered Agent	10. If changed, new Registered Agent/Office		
TAMPA F 10a. Pursuan for the p agent. I	nt to the provisions of sections 620,1051 en purpose of changing its registored office or am familiar with, and accept the obligation gistered Agent Accepting Appointment).	registered agent, or both, in the State of Fle s of section 620,192, Florida Statutes	Suite, Apt. #, etc City ed limited pertnershiprida. Such change w	o organized or registered under the laws of the authorized by its general partner(s). I her DATE ARTNERSHIP OR OTHE	oby accept the appointment of registered
11. me	e(s) of Goneral Partner(s)	Address of Each Gener 11a. (Do NOT Use Post Office I	al Partner Box Numbers) 11	lb. City, State & Zip Code	11c. Registration/ Document Number
G, C	oast realty investors,	10033B N. DALE MABF	NY	TAMPA FL 20002 -01/14 ***17	691152 C 5 7 32 - 4 787 - 01154 - 018 28.75 ****576.25

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 will. 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 to 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 interest by the partnership of the statutes.

SIGNATUR

Typed or Printed Name of General Partner Signing Form

SAM J. BUM