

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

FILED

97 MAR 27 AM 9:38

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 # A24029
ENCHANTING SHORES, LTD., A FLORIDA LIMITED PARTNERSHIP <div style="text-align: center; margin-left: 200px;">97-AR CM</div>	



Mailing Address 28 TURQUOISE AVE. NAPLES FL 33961	Principal Office Address 28 TURQUOISE AVE. NAPLES FL 33961	3. Date Formed or Registered 12/30/1986	5a. Capital Contributions as Shown on record. \$1,060,945.00
2. Mailing Address 32 Turquoise Avenue Suite, Apt. #, etc.	2a. Principal Office Address 32 Turquoise Avenue Suite, Apt. #, etc.	3a. Date of Last Report 12/27/1995	5b. Amount of Capital Contributions in FLORIDA to date: 1,044,854.00
City & State	City & State	4. State or Country of Formation FL	
Zip Country 34114	Zip Country 34114	6. FEI Number 59-2742081	<input type="checkbox"/> Applied For <input checked="" 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

CARTER, GARNEY E.
28 TURQUOISE AVE.
NAPLES FL 33961

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)
4814 32nd Avenue S.W.

Suite, Apt. #, etc.

City

FL Zip Code
34116

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)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/Document Number
ESL OF NAPLES, INC.	- 28-TURQUOISE-- 32 Turquoise Avenue	NAPLES FL 34114	J42154
400002131074--9 -04/02/97--01040--004 *****541.25 *****541.25			

CR2E003 (1/1/96)

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 Garney E. Carter, Inc. DATE 3/24/97

Typed or Printed Name of General Partner Signing Form GARNEY E. CARTER Daytime Telephone Number 941-793-1988