FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP **ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

4M 0: 29

1. Name of Limited Partnorship	A26328			97 DEC 26 AN 3. 23	
JESSUP SHORES LIMITED	PARTNERSHIP				
Mailing Address STE. 201 MAITLAND FL 32751	Principal Office Address F65 LOOKOUT PLACE STE. 201 MAITLAND FL 32751	FEE LOOKOUT PLACE STE. 201		Sa. Capital Contributions as Shown on record \$404,923.74 Sb. Amount of Capital Contributions in EOREDA to date:	
2. Mailing Address 175	2a. Principal Office Addre 175	2a. Principal Office Address 175		404,923.74	
Suite, Apt. #, etc. City & State	Suite, Apt. #, etc.	Suite, Apt. #, etc. City & State		Applied For Not Applicable	
Z ip Country	Zip			\$8.75 Additional Fee Required of State (See reverse side for fee information)	
for the purpose of changing its registered office or registered agent, or both, in the State agent, I am familiar with, and accept the obligations of section 620.192, Florida Statute SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS A CORPORATION MUST BE REGISTERED		DATE DON, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY DAND ACTIVE WITH THIS OFFICE.			
11. Name(s) of General Partner(s) EURO AMERICAN INVESTORS GROU	J 166 LOOKOUT PLAC		11b. City, State & 7tp Code MAITLAND FL 32751	G92106900011 3	

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

I do hereby certify that the information supplied with this filling 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 118.07(3)(k) in the event that the information supplied is deemed exempt from public access. I buther certify that the information indicated on this annual report is true and accurate and flast by strature shall have the same legal effects as if made under earli. I further certify that I am a General Partner of the limited partnership, receiver or trusted empowered to execute this report at a partner of the limited partnership, receiver or trusted empowered to execute this report at a partner of the limited partnership.

SIGNATURE -

Typed or Printed Name of General Partner Signing Form

A.C. Leerdam

DATE _ 12/22/97

Daytime Telephone Number _ (407) 645-5244