


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

FILED  
96 NOV -4 PM 3:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LIMITED PARTNERSHIP ANNUAL REPORT <b>1997</b>			FLORIDA DEPARTMENT OF STATE <b>Sandra Northam</b> Secretary of State DIVISION OF CORPORATIONS
1. Name of Limited Partnership  <b>EDISON GARDENS, LTD.</b>		1a. DOCUMENT # <b>A27326</b>  <i>97-AR245 CM</i>	
Mailing Address <b>645 NW 62ND ST., SUITE 300 MIAMI FL 33150</b>		Principal Office Address <b>645 NW 62ND ST., SUITE 300 MIAMI FL 33150</b>	
2. Mailing Address	2a. Principal Office Address		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		
City & State	City & State		
Zip	Country	Zip	Country
3. Date Formed or Registered <b>11/03/1988</b>		5a. Capital Contributions as Shown on record. <b>\$1,638,661.00</b>	
3a. Date of Last Report <b>11/20/1995</b>		5b. Amount of Capital Contributions in FLORIDA to date:	
4. State or Country of Formation <b>FL</b>		<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable	
6. FEI Number <b>65-0082006</b>		<input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
7. Certificate of Status Desired		8. Make check payable to: Dept. of State (See reverse side for fee information)	



9. Name and Address of Current Registered Agent <b>WOLFE, LEON J., ESQ. 100 SOUTHEAST SECOND ST. INTERNATIONAL PLACE, 38TH FL MIAMI FL 33131</b>		10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. City <b>FL</b> 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) <b>TEDC/SHELL CITY, INC.</b>	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) <b>645 NW 62ND ST.</b>	11b. City, State & Zip Code <b>MIAMI FL</b>	11c. Registration/Document Number <b>J46201</b>
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**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 *Lorenzo Simmons* DATE **October 30, 1996**  
Typed or Printed Name of General Partner Signing Form **Lorenzo Simmons** Daytime Telephone Number **(305)757-3737**

CR2E003 (6/96)