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

LIMITED PARTNERSHIP ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

96 DEC 31 PM 2: 18

SECRETARY OF STAIR TALLAHASSEE, FLORIDA

1. Name of Limited Partnership	1a. DOCUI A30426	MENT#	1 18 1/41 1 18 8 1/41 4 8 1/4 6 8 1/4 6 8 1/4 6 8 1/4 6 8 1/4 6 8 1/4 6 8 1/4 6 8 1/4 6 8 1/4 6 8 1/4 6 8 1/4		
RIVERWALK ENTERPRISES,	LTD.				
Mailing Address P.O. BOX 2129	Principal Office Address P.O. BOX 2129 WINTER PARK FL 32790		3. Date Formed or Registered 07/26/1990	5a. Capital Contributions as Shown on record	
WINTER PARK FL 32790			3a. Date of Last Report 12/22/1995	5b. Amount of Capital Contributions in FLORIDA to date:	
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	ib date.	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 59-3026910	Applied For Not Applicable	
City & State	City & State			\$8.75 Additional Fee Required	
Zip Country	Zip	Country	8. Make check payable to: Dept. c	f State (See reverse side for fee information)	
agent Tam familiar with, and accept the oblig SIGNATURE (Registered Agent Accepting Appointmen A GENERAL PARTNER TH	be or registered agent, or both, in the State of alions of section 620.192, Florida Statutes	City Hanamed limited partner of Florida. Such chang	pe was authorized by its general partner(s). The	eby accept the appointment of registeres	
11. Name(s) of General Partner(s)	11a. (Do NOT Use Post Offi		11b. City, State & Zip Code	11c. Registration/ Document Number	
RIVERWALK ENTERPRISES IN	154 PARK AVE. SOU	тн	WINTER PARK FL	L87987	
•			90002 -01/0(****	20501996 3/9701038017 576.25 ****\$76.25	
Note: General partners MAY	NOT be changed on this fo	orm; an ame	ndment must be filed to ch	ange a general partner.	
12. I do hereby certify that the information supplied Corporations from any liability of non-compliand this annual report is true and accurate and that empowered to execute this report as required b	e with Section 119 07(3)k) in the event that t my signature shall have the same legal effec	the information suppl	ied is deemed exempt from public access. I fur	her certify that the information indicated on	

Michael L. Green

Typed or Printed Name of General Partner Signing Form _____

907-647-0300

Daytime Telephone Number