FILE ON OR BEFORE DECEMBER 31, 1998 OR LIMITED PARTNERSHIP WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1999	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS				
1. Name of Limited Partnership	1a, DOCUMENT # A94000000422		98 NOV -9 AM 9:01 SECRETARY UP STATE		
BAYSHORE GRAND, LTD.					
Mailing Address	Principal Office Address		3. Date Formed or Registered	5a. Capital Contributions as Shown on record.	
319 BAYSHORE BLVD.	319 BAYSHORE BLVD.		03/31/1994	\$634,000.00	
TAMPA FL 33606	TAMPA FL 33606		3a. Date of Last Report	Ψ004,000.00	
			11/06/1997	5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address	2a. Principal Office Address		4. State or Country of Formation	to date:	
			FL		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number 59-3234222	Applied For Not Applicable	
City & State	City & State		7. Certificate of Status Desired	\$8.75 Additional	
Zip Country	Zip Country		8. Make check payable to: Dept. of S	Fee Required state (See reverse side for fee information)	
9. Name and Address of Current Registered Agent		Name	10. If changed, new Registered Agent/Office		
BURKE, DAVID P ATTY.		Street Address (P.O. Box Number Is Not Acceptable)			
C/O CARLION, FIELDS, WARD, ET AL					
ONE HARBOUR PLACE, SUITE 206 TAMPA FL 33609	Suite, Apt.				
Wall At E 00000	City			FL Zip Code	
10a. Pursuant to the provisions of sections 620.1951 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)					
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 (Do NOT Use Post Office Bo	Partner 11b	City, State & Zip Code	11c. Registration/ Document Number	
BAYSHORE GRAND, INC.	3333 WEST KENNEDY BOU		TAMPA FL 33609	P94000024619	
			0000026 -11/17/9 ****52	887505 8-01002-015 6.25 ****526.25	
1			•	NOV 1 2 1998	
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.					
12. It 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 cath. 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.					
SIGNATUREX DATE 4 NOV 98					
Typed or Printed Name of General Partner Signing Form					