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

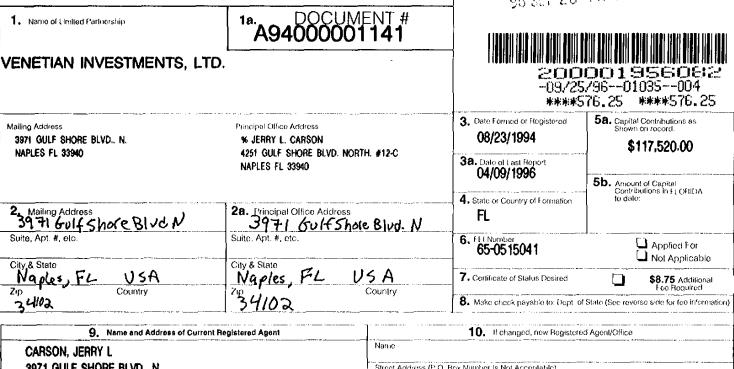
Sandra Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

96 SEP 20 PM 3: 35



9. Name and Address of Current Registered Agent	10. If changed	10. If changed, new Registered Agent/Office	
CARSON, JERRY L	Name		
3971 GULF SHORE BLVD., N. NAPLES FL 33940	Street Address (P.O. Box Number is Not Acceptable)		
	Suile, Apt. #, etc		
	City	FL Zip Code	
10a. Pursuant to the provisions of sections 620 1051 and 620 192. Florida Statutes, the	bove-named limited partnership organized or registered un	der 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. 11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) Registration/

11. Name(s) of General Partner(s) City, State & Zip Code 11c. Document Number -4251 GULF SHORE BLVD.-3971 Gulf Shac Blvd N. -NAPLES PL 33940-1 CARSON, JERRY L Naples, FL 34102

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

12. If 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, Frelease the Division of Corporations from any liability of non-compliance willi Section 119.07(3)(k) in the event that the information supplied is decreed 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 logal effects as if made under eath. I further certify that I am a General Partner of the limited partnership, receiver or trustee.

SIGNATURE

- General Partner DATE Sept. 12, 1996