

FILE ON OR BEFORE APRIL 9, 1997 TO AVOID REVOCATION
AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF
Sandra H. ...
Secretary of State
DIVISION OF CORPORATIONS

A96000001576

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 MAY -7 AM 8:43



1. Name of Limited Partnership

1a. DOCUMENT #
A96000001576

EDGEWATER BEACH PROPERTIES LIMITED PARTNERSHIP

Mailing Address 1901 GULF SHORES BLVD. NORTH NAPLES FL 33940		Principal Office Address 1901 GULF SHORES BLVD. NORTH NAPLES FL 33940	
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 08/21/1996	5a. Capital Contributions as Shown on record. \$7,500.00
3a. Date of Last Report N/A	5b. Amount of Capital Contributions in FLORIDA to date: \$7,500.00
4. State or Country of Formation FL	6. FEI Number 65-0694199 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
7. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
8. Make check payable to: Dept. of State (See reverse side for fee information)	

9. Name and Address of Current Registered Agent

**AYRES, JOHN E JR.
1901 GULF SHORES BLVD. NORTH
NAPLES FL 33940**

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number Is Not Acceptable)

Suite, Apt. #, etc.
700002172867--3

City
**05/03/97-01070--005
***656.FL ***656.25**

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)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/Document Number
EDGEWATER BEACH DEVELOPMENT, INC	1901 GULF SHORES BLVD	NAPLES FL 33940	P96000065132

REINSTATEMENT *9/17*
OK 5-8

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 *William P. Esping* DATE **4/30/97**

Typed or Printed Name of General Partner Signing Form **WILLIAM P. ESPING** Daytime Telephone Number **(214) 905-2339**

CR2E003 (1/1/96)