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

LIMITED PARTNERSHIP. ANNUAL REPORT 1997

TREASURE HOUSE POINT LIMITED PARTNERSHIP

FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # B93000000377

97 JAN 27 PM 5: 23 SECRETARY OF STATE SELAHASSEE FLORIDA



Mailing Address C/O GOLDMAN. SAC 100 CRESCENT COL DALLAS TX 75201		C/O GOLDMAN. SAC 100 CRESCENT COU DALLAS TX 75201			5a. Capital Contributions as Shown on record.
2. Mailing Address c/o Legal Dept. 600 E. Las Colinas Blvd.		28. Principal Office Addressc/o Real Estate 85 Broad Street		06/13/1996 4. State or Country of Formation DE	5b. Amount of Capital Contributions in FLORIDA to date: \$4,600,000.00
Suite, Apt. #, etc. Suite 1900		Suite, Apt. #, etc. 19th Floor		6. FEI Number 13-3730427	Applied For Not Applicable
City & State Irving, TX	Country	City & State New York, N		7. Certificate of Status Desired	\$8.75 Additional Fee Required
Zip 75039	Country USA	Zip 10004	Country USA	8. Make check payable to: Dept. o	of State (See reverse side for fee information)
9. Name and Address of Current Registered Agent				10. If changed, new Registered Agent/Office	
THE PRENTICE HALL CORPORATION SYSTEM, INC.			Name	Name	

THE PRENTICE HALL CORPORATION SYSTEM, INC.	Name	ľ
1201 HAYS ST. STE. #105 TALLAHASSEE FL 32301	Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc02/06/9701123003	(}
INTENTIONALE LE DEPOT	ску **35470.10 **** 576.29	

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)

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)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number
TREASURE HOUSE POINT CORP.	100 CRESCENT CT, STE.	DALLAS TX 75201	-F8000000047- F9600000 8207
			AVE
			516.25

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. Frelease the Division of
	Corporations from any hability of non-comphance 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 truste
	empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNA	TURE -
	_1

Vice President of New Treasure House Point Typed or Pupiled Name of Ceneral Partner Symmon form Partner of Treasure House Point Daytime Telephone Number

0011551