FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL						
OMB Number:	3235-0287					
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or Se	ectio	on 30(h)) of the	Ínvestm	ent C	ompany Act	of 1940						
	LLI ASSE	Reporting Person		ENT INC		ES	TWC				g Symbol <mark>GS GRO</mark>	UP II	<u>\C</u>		all app	plicable) ctor		Owner
(Last)	(Fin	st) (f	Middle	e)			of Earli 2004	est Tra	nsaction	(Mon	th/Day/Year)				belo	er (give title w)	belov	(specify /)
	RPORATE	,		,	4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)				
(Street) RYE	NY	? 1	0580)										X		n filed by Mor	e Reporting Pe e than One Re	
(City)	(Sta		Zip)			_												
1 Title of	Security (Inst		eI-	Non-Deriv			Deemed		cquired	l, Di	sposed of					ed nount of	6. Ownership	7. Nature
i. mae or	occurry (ma	Date Execut (Month/Day/Year) if any		Execution Date,		Transaction Code (Instr. 8)		Disposed Of (D) (Instr. 3, 5)			4 and Secu		rities ficially ed	Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) or (D)	Price	•	Repo Trans		(111341. 4)	(11341. 4)
Common	Stock			10/27/20	04				P		2,600	A	\$18	.0392	8	73,450	D	
		Та	ble l	ll - Derivat e.g., pı(,	•	osed of, o			•	vned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exec if an	Deemed ution Date, y nth/Day/Year)	4. Trans Code 8)		on of Der Sec (A) Dis of (In:	rivative curities quired or sposed (D) str. 3, 4 d 5)	Expira (Mont	tion I		Amoun Securiti Underly Derivati	Title and 8. Price 9. Number of 10. ount of of derivative Own Securities For derlying Security Beneficially Directivative Curity (Instr. 5) Owned or I Following (I) (I)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership		
					Code		V (A)	(D)	Date Exerci	sable	Expiration Date	Title	Amour or Number of Shares	er				
		f Reporting Person		ENT INC	<u>ET</u>	_												
(Last)		(First)	(Middle)														
ONE CO	RPORATE	CENTER				_												
(Street) RYE		NY	1	10580														
(City)	ı	(State)	(.	Zip)														

1. Name and Addres		erson
(Last)	(First)	(Middle)
C/O GABELLI A	SSET MANAC	GEMENT INC
ONE CORPORA	TE CENTER	
(Street)		
RYE	NY	10580
-		
(City)	(State)	(Zip)
1. Name and Addres GABELLI GR INC		erson [*] ITAL PARTNERS
(Last)	(First)	(Middle)
140 GREENWIC	H AVE.	
(Street)		
GREENWICH	CT	06830
(City)	(State)	(Zip)

Explanation of Responses:

/s/ James E. McKee, Attorneyin-Fact for MARIO J.
GABELLI and Secretary of
GABELLI ASSET
MANAGEMENT INC. AND
GABELLI GROUP CAPITAL
PARTNERS, INC.

10/28/2004

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.

^{*} If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

^{**} Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).