

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10/2



LIMITED PARTNERSHIP REINSTATEMENT

FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS

SECRETARY OF STATE DIVISION OF CORPORATIONS

03 DEC -2 AM 10: 39

DOCUMENT # A02000000336

1. Name of Limited Partnership

MEREDITH PARTNERS LIMITED PARTNERSHIP

700024165467 10/27/03--01053--002 \*\*526.25

2. Principal Office Address 126 PIERREPONT ST.

3. Mailing Office Address Same

4. Date Formed or Registered To Do Business in Florida 3/9/02

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number 45-0468827 Applied For Not Applicable

City & State Brooklyn Heights NY

City & State

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

Zip 11201 Country USA

Zip Country

7a. Capital Contributions as shown on Record: 28,000,000

7b. Amount of Capital Contributions in FLORIDA to date: 28,000,000

B. Name and Address of Current Registered Agent

Name CORPORATION SERVICE COMPANY

Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET

Suite, Apt. #, Etc.

City TALLAHASSEE State FL Zip Code 32301

FEES: 1) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 7b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office. 2) Supplemental Fee(s): \$88.75 for each year due this office, beginning with 1992 calendar year. 3) Penalty Fee(s): \$500 penalty fee for each year report form is due. Note: If the amount entered in 7b is greater than amount entered in 7a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.

9. Pursuant to the provisions of sections 620.1051 and 620.1052, 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) and they accept the appointment of registered agent, turn familiar with, and accept the obligations of section 620.102, 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.

Table with 4 columns: 10. Name(s) of General Partner(s), Address of Each General Partner (Do NOT Use Post Office Box Numbers), City, State and Zip Code, 10a. Registration Document Number. Rows include Kathryn Scott and James Scott with their respective addresses in Brooklyn Heights NY and Fredericksburg TX.

REINSTATEMENT

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

11. 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)(f), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(c) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this document is true and accurate and that my signature shall have the same legal effect as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee named in this document as required by Chapter 620, Florida Statutes.

SIGNATURE Kathryn J. Scott DATE 10.20.2003 Type or Printed Name of General Partner Signing Form KATHRYN J. SCOTT Telephone Number 718 935 0425

**JAY SERBIN, CPA, P.A.**  
*Certified Public Accountant*  
**9600 WEST SAMPLE ROAD, SUITE 501**  
**CORAL SPRINGS, FLORIDA 33065**

2 of 2

(954)346-1996  
fax (954)346-1970  
email: [cpajay@aol.com](mailto:cpajay@aol.com)

October 17, 2003

Division of Corporations  
Attention: Partnership Section  
P.O. Box 6327  
Tallahassee, FL 32314

**Re: Meredith Partners Limited Partnership**  
**Document Number: A02000000336**  
**FEI Number: 45-0468827**

Gentlemen:

The enclosed Limited Partnership Reinstatement form and check in the amount of \$526.25 is being submitted by my client named above to be reinstated effective January 1, 2003. Please be advised that this partnership did not receive any previous notice or forms to file or pay for 2003. In accordance with my conversation with Lee in your office on October 15, 2003, he stated that by submitting this letter with the appropriate maximum fee of \$437.50 and supplemental fee of \$88.75, the penalty charge of \$500.00 would be waived.

I thank you in advance for your cooperation in this matter.

Sincerely,



JAY SERBIN

JS:  
Enclosures  
cc: Meredith Partners Limited Partnership