

A02000000899

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 DEC 26 PM 2:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

500025770835
12/26/03--01031--016 **1026.25

LIMITED PARTNERSHIP REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # A02000000899

1. Name of Limited Partnership
Ewald Pfeifer Family Limited Partnership

2. Principal Office Address
**Ewald Park Place, Inc.
Attn: Melissa McGowan,
Suite, Apt. #, etc. Harris Bank
777 S. Flagler Dr., #140**

3. Mailing Office Address
**c/o Melissa McGowan, Harris
Bank
Suite, Apt. #, etc.
777 S. Flagler Dr., #140**

City & State
West Palm Beach, FL

City & State
West Palm Beach, FL

Zip Country Zip Country
33401 USA 33401 USA

4. Date Formed or Registered To Do Business in Florida
7/1/2002

5. FEI Number
06-1639328

Applied For
Not Applicable

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

7a. Capital Contributions as shown on Record:
More Than \$250,000.00

7b. Amount of Capital Contributions in FLORIDA to date:
More Than \$250,000.00

8. Name and Address of Current Registered Agent

Name
Richard Paladino, Esq.

Street Address (P.O. Box Number is Not Acceptable)
Rogers, Dempsey and Paladino, P.A.

Suite, Apt. #, Etc.
505 S. Flagler Drive, Suite 1330

City State Zip Code
West Palm Beach FL 33401

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 delinquent.

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 620.192, 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) *[Signature]* DATE **12/10/03**

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

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
Ewald Park Place, Inc.	c/o Melissa McGowan, Harris Bank 777 S. Flagler Dr., #140	West Palm Beach, FL 33401	P02000071638

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)(i), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(i) 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 *[Signature]* DATE **12/10/03**

Typed or Printed Name of General Partner Signing Form **Brewster M. Loud, Secretary** Telephone Number **(561) 655-8980**

CR2E039 (10/02)