

A18047

APPLICATION FOR REINSTATEMENT FOR LIMITED PARTNERSHIP



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

99 JUN 15 AM 9:14

DOCUMENT # A18047

1. Name of Limited Partnership Grace Properties #22, Ltd. 155 Sabal Palm Dr. Longwood, FL 32779

DO NOT WRITE IN THIS SPACE

2. Mailing Address same

3. Principal Office Address 155 SABAL PALM

4. Date Formed or Registered To Do Business in Florida 10/12/84

Suite, Apt #, etc

Suite, Apt #, etc

5. FEIN Number 59-2675698

Applied For Not Applicable

City & State

City & State LONGWOOD FL.

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

Zip

Country

Zip 32779

Country USA

7. State or Country of Formation FLORIDA

8a. Capital Contributions as Shown on Record 500,000

FEES: 1) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 8a, 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 8b is greater than amount entered in 8a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.

8b. Amount of Capital Contributions in FLORIDA to date 414,485.00

9. Name and Address of Current Registered Agent

10. If changed, new registered agent/office

STEVEN RAJTA 155 SABAL PALM DRIVE LONGWOOD, FL. 32779

Name STEVEN RAJTA Street Address (P.O. Box Number is Not Acceptable) 155 SABAL PALM DRIVE State, Apt #, etc LONGWOOD City FL Zip Code 32779

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) Steven A. Rajta

DATE 1/11/99

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

11. Names of General Partner(s)

Address of Each General Partner (Do NOT Use Post Office Box Numbers)

City, State, and Zip Code

11a. Registration Document Number

GRACE PROPERTIES, INC. Philip C. Grace

155 SABAL PALM DR. 155 SABAL PALM DR.

LONGWOOD, FL. 32779 LONGWOOD FL. 32779

09 7830

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REINSTATEMENT 94, 95, 96, 97, 98, 99

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

2. 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

Andrea Holcomb, Vice President of Gen Part. 1/11/99

Typed or Printed Name of General Partner Signing Form

ANDREA HOLCOMB, Vice Pres. of Gen Part. Telephone Number 407 786-8820

CR2E038 (12/97)