SIGNATURE: By Signature

DOCUMENT # A30712 1. Entity Name FIRST FAIRWAYS, LIMITED PARTNERSHIP								FILED SECRETARY OF STATE DIVISION OF CORPORATIONS		
rino) FA	JINYVA1O, I	IMITED PARTNERSHIP		·			la;	VISION OF COM ON IO:	12	
3201 ENTERPRISE PKWY STE. 140 320				Mailing Address 201 ENTERPRISE PKWY., STE, 140 BEACHWOOD OH 44122			· .	02 JAN 29 AM 10:	1 6-	
2. Principal Place of Business 3. Mailing Address								: 886 : 1111 BRITH 1888 1884 FIRS		
Suite, Apt. #, etc.				Suite, Apt. #, etc.			DUE BY MAY 1, 2002			
City & State			City & State				4. FEI Number 34-1708725 Applied For Not Applied be			le
Zip	Zip Country -		Zip Co		Coun	ntry ————	5. Certificate o	f Status Desired	\$8.75 Additional Fee Required	-
	6. Name	and Address of Current	Regis	tered Agent		Nome	7. Name and A	Address of New Registered	·	
VAN CLEEF FAIRWAY PROPERTIES, INC. 3400 SE SUMMERFIELD WAY STUART FL 34997						Name Street Addres	s (P.O. Box Number is Not Acceptable)			4
									<u> </u>	\dashv
						City		. FL	Zip Code	\dashv
8. The above i	named entit	y submits this statement for	the £	ourpose of changing its	register	Led office or regis	stered agent, or both	, in the State of Florida.		1
SIGNATURE _	Signature Ivoed	or printed name of registered agent a	nd title	if applicable				DATE		ļ
Signature, typed or printed name of registered agent and title if applicable. 9. Capital Contributions as Shown on record. \$3,220,000.00 In FLORIDA to date						ontributions 11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION				
as onown o	AC			IS A BUSINESS EN	TITY M			CTIVE WITH THIS OFFIC	E.	=
NOTE: General Partners MAY NOT be changed on the GENERAL PARTNER INFORMATION						13. ADDRESS CHANGES ONLY				
OCUMENT # P39178 VAN CLEEF FAIRWAY PROPERT			IES, INC.			EET ADDRESS				(9/01
		RPRISE PKWY., STE. 140 OD OH 44122			CITY	'-ST-ZIP	70	700004882977		ZE003 (9/01)
DOCUMENT #	ADDRESS					EET ADDRESS		-02/06/0201038020 ****526.25 *****526.25		
STREET ADDRESS						-ST-ZIP	المراجعة الموافقيين والمراجعة والمراجعة والمراجعة والمراجعة والمراجعة والمراجعة والمراجعة والمراجعة والمراجعة			
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NAME STREET ADDRESS CITY-ST-ZIP					CITY	'-ST-ZIP				1
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NAME Street Address City-St-Zip					CITY	'-ST-ZIP				7
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STREET ADDRESS CITY-ST-ZIP					CITY	'-ST-ZIP				
OOCUMENT #					STRE	EET ADDRESS				
STREET ADDRESS CITY-ST-ZIP				•	CITY	'-ST-ZIP				
indicated o	on this repo er or trustee	rt is true and accurate and empowered to execute this	that m	ny signature shall have ort as required by Chap	the same ter 620,	e legal effect as Florida Statutes ムト	if made under oath;	, Florida Statutes. I further ceithat I am a General Partner of	the limited partnership	or [[]