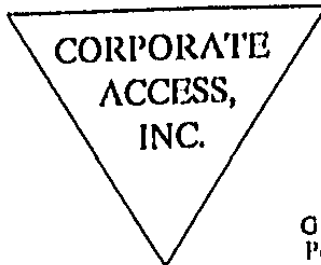


A95000000940



1116-D Thomasville Road
Mount Vernon Square
Tallahassee, Florida 32303
(904) 222-2666
(904) 222-1666 (Fax)
(800) 969-1666

GLINDA P. BENNETT
Personal Representative

5 JUN 22 AM 11:13
DIVISION OF CORPORATIONS

OFFICE USE ONLY

55 JUN 22 AM 11:57

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. GATLIN OAKS Limited Partnership
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time

☐ Mail out ☐ Will wait

☐ Photocopy

☒ 6-22 1:00
6-22 1:00
Copy

☐ Certificate of Status

500001524405
-06/27/95--01071--003
***1785.00 ***1785.00

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input checked="" type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

G. TAX
FILING 1750.00
R. AGENT FEE 35.10
G. COPY
TOTAL 1785.10
N. BANK
BALANCE DUE
REFUND

Examiner's Initials

6/22/95
BK

CERTIFICATE OF LIMITED PARTNERSHIP
OF
GATLIN OAKS LIMITED PARTNERSHIP

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 22 11:51

THE UNDERSIGNED, desiring to form the Limited Partnership of Gatlin Oaks Limited Partnership (the "Partnorship"), pursuant to the Revised Uniform Limited Partnership Act of the State of Florida, hereby adopt, file, swear to and certify this Certificate:

1. Name. The name of the Partnership is Gatlin Oaks Limited Partnership (the "Partnership").

2. Location of the Principal Office and Mailing Address of the Partnership. The principal office of the Partnership referred to in Section 620.105, Florida Statutes, is located at and its mailing address is 100 West Pineloch Avenue, Post Office Box 568367, Orlando, Florida 32856-8367.

3. Agent for Service of Process. The name and address of the agent for service of process on the Partnership shall be James P. Caruso, 100 West Pineloch Avenue, Post Office Box 568367, Orlando, Florida 32856-8367.

4. Name and Business Address of the Partners. The names and business addresses of the Partners, General and Limited, respectively, are as follows:

General Partners:

James P. Caruso
100 West Pineloch Avenue
P.O. Box 568367
Orlando, FL 32856-8367

Austin A. Caruso, Jr.
2024 Companero Avenue
Orlando, FL 32804

Stephen M. Caruso
1355 So. Summerlin Avenue
Orlando, FL 32806

Limited Partners:

James A. Caruso, Trustee
of the James Philip Caruso
Revocable Trust dated 11/13/72,
as amended and restated

Austin A. Caruso, Jr., Trustee
of the Austin A. Caruso, Jr.
Revocable Trust dated 1/17/67,
as amended and restated

Stephen M. Caruso, Trustee
of the Stephen M. Caruso
Revocable Trust dated 3/27/70,
as amended and restated

5. Term of the Partnership. The Partnership shall commence on July 1, 1995, and continue in existence until June 30, 2035, unless sooner terminated, liquidated or dissolved by law or in accordance with the Partnership Agreement.

IN WITNESS WHEREOF, the parties hereby have sworn to and signed and will cause to be duly filed this Certificate of Limited Partnership. This Certificate is executed this 19 day of June 1995.

James P. Caruso
James P. Caruso, General Partner

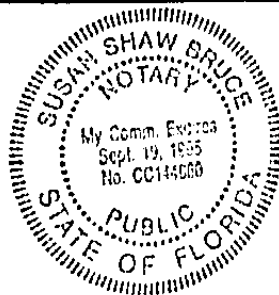
Austin A. Caruso, Jr.
Austin A. Caruso, Jr., General Partner

Stephen M. Caruso
Stephen M. Caruso, General Partner

FILED
STATE
SECRETARY OF CORPORATIONS
JUN 22 PM 11:51

STATE OF FLORIDA
COUNTY OF Orange

The foregoing instrument was acknowledged before me this 19 day of June, 1995 by JAMES P. CARUSO. Said person did not take an oath and (check one) ☒ is personally known to me, ☐ produced a driver's license (issued by a state of the United States within the last five (5) years) as identification, or ☐ produced other identification, to wit: _____

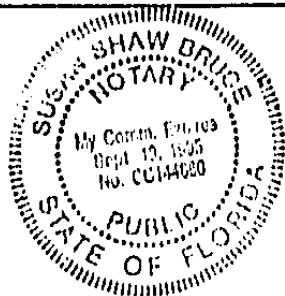


Susan Shaw Bruce
Print Name: Susan Shaw Bruce
Notary Public - State of Florida
Commission Number: CC144660
My Commission Expires: 9-19-95
Notary Public, State of Florida at Large
My Commission Expires September 19, 1995

STATE OF FLORIDA
COUNTY OF Orange

The foregoing instrument was acknowledged before me this 19 day of June, 1995 by AUSTIN A. CARUSO, JR. Said person did

not take an oath and (check one) ☒ is personally known to me,
☐ produced a driver's license (issued by a state of the United
States within the last five (5) years) as identification, or
☐ produced other identification, to wit: _____



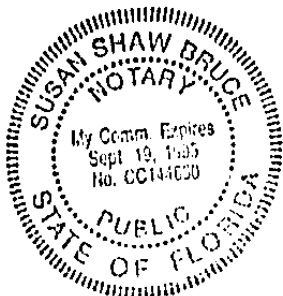
Susan Shaw Bruce
Print Name: Susan Shaw Bruce
Notary Public - State of Florida
Commission Number: CC144620
My Commission Expires: 9-19-95

Notary Public, State of Florida at Large
My Commission Expires September 19, 1995

FILED STATE
SECRETARY OF CORPORATIONS
JUN 22 1995
11:57

STATE OF FLORIDA
COUNTY OF Marion

The foregoing instrument was acknowledged before me this
19 day of June, 1995 by STEPHEN M. CARUSO. Said person did not
take an oath and (check one) ☒ is personally known to me,
☐ produced a driver's license (issued by a state of the United
States within the last five (5) years) as identification, or
☐ produced other identification, to wit: _____



Susan Shaw Bruce
Print Name: Susan Shaw Bruce
Notary Public - State of Florida
Commission Number: CC144620
My Commission Expires: 9-19-95

Notary Public, State of Florida at Large
My Commission Expires September 19, 1995

STATE OF FLORIDA
COUNTY OF Orange

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned, personally appeared James Caruso, Austin A. Caruso, Jr., and Stephen M. Caruso, as General Partners for Gatlin Oaks Limited Partnership, a Florida limited partnership, hereinafter referred to as the "Partnership", who, upon being duly sworn, certified on behalf of the General Partner and the Partnership as follows:

1. The amount of the capital contributions made to the Partnership by the limited partners is One Million Fifty-Two Thousand Four Hundred Eleven Dollars and 28/100 (\$1,052,411.28).

2. The amount of additional capital contributions anticipated to be contributed by the limited partners is \$0.

FURTHER AFFIANT SAYETH NOT.

Under penalties of perjury, the undersigned declares that he has read the foregoing and that the facts alleged are true, to the best of his knowledge and belief.

Signed, sealed and delivered
in the presence of:

FAIRWAY PROPERTIES LIMITED
PARTNERSHIP

Susan Shaw Bruce
Print Name: Susan Shaw Bruce

By: James P. Caruso
James P. Caruso, General
Partner

Mary M. Hurley
Print Name: Mary M. Hurley

By: Austin A. Caruso, Jr.
Austin A. Caruso, Jr.,
General Partner

Susan Shaw Bruce
Print Name: Susan Shaw Bruce

Mary M. Hurley
Print Name: Mary M. Hurley

Susan Shaw Bruce
Print Name: Susan Shaw Bruce

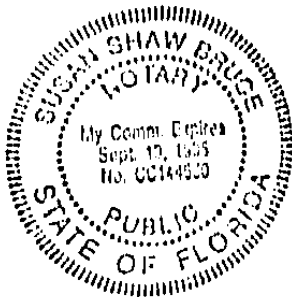
By: Stephen M. Caruso
Stephen M. Caruso, General
Partner

Mary M. Hurley
Print Name: Mary M. Hurley

The foregoing instrument was acknowledged before me this 19 day of June, 1995, by JAMES P. CARUSO. Said person did not take an oath and (check one) ☒ is personally known to me, ☐ produced a driver's license (issued by a state of the United States within the

FILED
STATE
SECRETARY OF
DIVISION OF
95 JUN 22 PM 11:57

last five (5) years) as identification, or ☐ produced other identification, to wit: _____.

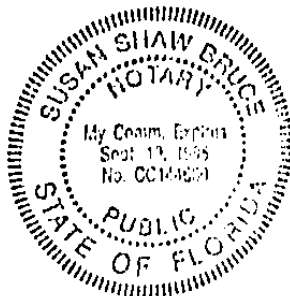


Susan Shaw Bruce
Print Name: Susan Shaw Bruce
Notary Public - State of Florida
Commission Number: CC144660
My Commission Expires: 9-19-95

Notary Public, State of Florida at Large
My Commission Expires September 19, 1995

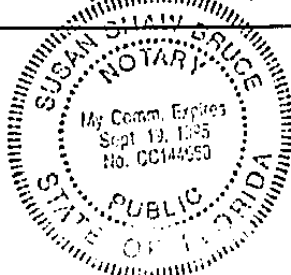
FILED
SECRETARY OF STATE
JUN 22 1995
11:51

The foregoing instrument was acknowledged before me this 19 day of June, 1995, by AUSTIN A. CARUSO JR. Said person did not take an oath and (check one) ☒ is personally known to me, ☐ produced a driver's license (issued by a state of the United States within the last five (5) years) as identification, or ☐ produced other identification, to wit: _____.



Susan Shaw Bruce
Print Name: Susan Shaw Bruce
Notary Public - State of Florida
Commission Number: CC144660
My Commission Expires: 9-19-95
Notary Public, State of Florida at Large
My Commission Expires September 19, 1995

The foregoing instrument was acknowledged before me this 19 day of June, 1995, by STEPHEN M. CARUSO. Said person did not take an oath and (check one) ☒ is personally known to me, ☐ produced a driver's license (issued by a state of the United States within the last five (5) years) as identification, or ☐ produced other identification, to wit: _____.



Susan Shaw Bruce
Print Name: Susan Shaw Bruce
Notary Public - State of Florida
Commission Number: CC144660
My Commission Expires: 9-19-95

Notary Public, State of Florida at Large
My Commission Expires September 19, 1995

CERTIFICATE DESIGNATING PLACE OF BUSINESS FOR THE
SERVICE OF PROCESS WITHIN FLORIDA AND REGISTERED
AGENT UPON WHOM PROCESS MAY BE SERVED

95 JUN 22 PM 11:57
DIVISION OF
SECRETARY OF
FLORIDA STATE
CORPORATIONS

In compliance with Section 620.192, Florida Statutes, the following is submitted:

Gatlin Oaks Limited Partnership, a limited partnership formed pursuant to the laws of the State of Florida with its registered office at 100 West Pinaloch Avenue, Post Office Box 568367, Orlando, Florida 32856-8367, has named and designated James P. Caruso as its Registered Agent to accept service of process within the State of Florida at said address.

ACKNOWLEDGMENT

Having been named to accept service of process for the above-named limited partnership, at the place designated in this Certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties as Registered Agent.

Dated this 19th day of June, 1995.

James P. Caruso
James P. Caruso, Registered Agent

FILE ON OR BEFORE DECEMBER 31, 1995 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra Northing
Secretary of State
DIVISION OF CORPORATIONS

FILED

95 OCT -2 AM 11:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership	1a. DOCUMENT # A95000000940 9600 CM
GATLIN OAKS LIMITED PARTNERSHIP	
Mailing Address P.O. BOX 56067 ORLANDO FL 32856-8367	Principal Office Address 100 WEST PINELOCH AVENUE ORLANDO FL

2. New Mailing Address, if Applicable
Date, Apt. #, etc.
City, State & Zip 600001503876 10/09/95--01027--008
2a. New Principal Office ****576.25 ****576.25
Date, Apt. #, etc.
City, State & Zip

3. Date Formed or Beg. to Do Business in FLORIDA 06/22/1995	3a. Date of Last Report	4. State or Country of Formation FL
-------------------------------------------------------------------	-------------------------	----------------------------------------

5a. Capital Contributions as Shown on Record \$1,052,411.28	5b. Amount of Capital Contributions in FLORIDA to date 1,052,411.28	6. FEI Number 59-1678444	Applied For Not Applicable	7. CERTIFICATE OF STATUS REQUIRED Use this Address for request for a Certificate of Status
-------------------------------------------------------------------	---------------------------------------------------------------------------	-----------------------------	-------------------------------	--------------------------------------------------------------------------------------------------

8. FEES: 1.) Filing Fee: Computed at a rate of \$7 per \$1,000 on amount entered in 5a or 5b if 5a blank, with a minimum filing fee of \$52.50 and a maximum of \$437.60
2.) Supplemental Fee: \$138.75 (pursuant to section 607.103, F.S.)
THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$138.75) AND NO MORE THAN \$576.25 (\$437.50 + \$138.75)
Note: If the amount entered in 5b is greater than amount entered in 5a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE.

9. Name and Address of Current Registered Agent CARUSO, JAMES P 100 WEST PINELOCH AVENUE ORLANDO FL	10. If changed, new Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Date, Apt. #, etc. City FL Zip Code
--------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------

10a. Pursuant to the provisions of sections 620.1061 and 620.102, 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 620.102, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY

11. Name(s) of General Partner(s)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/ Document Number
CARUSO, JAMES P	100 WEST PINELOCH AVE	ORLANDO FL	
CARUSO, AUSTIN A JR.	2024 COMPANERO AVE.	ORLANDO FL 32804	
CARUSO, STEPHEN M	1355 SO. SUMMERLIN AV	ORLANDO FL 32806	

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

12. 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 and to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

DATE

Typed or Printed Name of General Partner Signing Form

Telephone Number

0001371

CR2E003 (6/95)

A95000000940

RECICAR & STARK, P. A.

ATTORNEYS AT LAW

SUITE 100

986 DOUGLAS AVENUE

ALTAMONTE SPRINGS, FLORIDA

32714

THOMAS S. RECICAR

CHARLES H. STARK

TELEPHONE (407) 788-0250

FACSIMILE (407) 788-7244

February 27, 1996

Florida Secretary of State
Corporations Division
Post Office Box 6327
Tallahassee, Florida 32314

FILED
-03/01/96 -01075-002
*****52.50 *****52.50

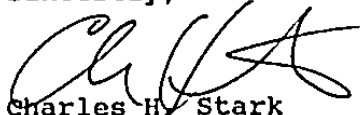
Re: Gatlin Oaks Limited Partnership

Dear Sir or Madam:

Enclosed for filing is an original and one (1) copy of the Amended Certificate of Limited Partnership for the above-referenced partnership. Also enclosed is our firm's check payable to your office in the amount of Fifty-Two Dollars and 50/100 (\$52.50) representing the filing fee associated with this service.

Please have a stamped copy of the filed Amended Certificate of Limited Partnership returned to the undersigned in the enclosed self-addressed, stamped envelope. Your prompt attention to this matter would be greatly appreciated.

Sincerely,



Charles H. Stark

CHS/db
Enclosures

A95000000940

Name	
Availability	
Document	
Examination	
Update	
Utility	
Lease	
Alp51chslgadin.011	000
000	000

FILED
MAR - 1 AM 9 30

AMENDED CERTIFICATE OF LIMITED PARTNERSHIP
OF
GATLIN OAKS LIMITED PARTNERSHIP

THE UNDERSIGNED, desiring to amend the Certificate of Limited Partnership of Gatlin Oaks Limited Partnership (the "Partnership"), pursuant to the Revised Uniform Limited Partnership Act of the State of Florida, hereby adopt, file, swear to and certify this Certificate:

1. Name. The name of the Partnership is Gatlin Oaks Limited Partnership (the "Partnership").

2. Location of the Principal Office and Mailing Address of the Partnership. The principal office of the Partnership referred to in Section 620.105, Florida Statutes, is located at and its mailing address is 100 West Pineloch Avenue, Post Office Box 568367, Orlando, Florida 32856-8367.

3. Agent for Service of Process. The name and address of the agent for service of process on the Partnership shall be James P. Caruso, 100 West Pineloch Avenue, Post Office Box 568367, Orlando, Florida 32856-8367.

4. Name and Business Address of the Partners. The names and business addresses of the Partners, General and Limited, respectively, are as follows:

General Partners:

James P. Caruso
100 West Pineloch Avenue
P.O. Box 568367
Orlando, FL 32856-8367

Austin A. Caruso, Jr.
2024 Companero Avenue
Orlando, FL 32804

Stephen M. Caruso
1355 So. Summerlin Avenue
Orlando, FL 32806

Limited Partners:

James P. Caruso, Trustee
of the James Philip Caruso
Revocable Trust dated 11/13/72,
as amended and restated
P.O. Box 568467
Orlando, FL 32856-8367

Austin A. Caruso, Jr., Trustee
of the Austin A. Caruso, Jr.
Revocable Trust dated 1/17/67,
as amended and restated
2024 Companero Avenue
Orlando, FL 32804

Stephen M. Caruso, Trustee
of the Stephen M. Caruso
Revocable Trust dated 3/27/70,
as amended and restated
1355 So. Summerlin Avenue
Orlando, FL 32806

FILED
JAN 30 1973
FBI - ORL

Limited Partners:

Stephen M. Caruso, Trustee of
the Leslie M. Caruso Trust
dated September 13, 1990
1355 So. Summerlin Avenue
Orlando, FL 32806

Stephen M. Caruso, Trustee of
the Julie B. Caruso Trust dated
August 31, 1990
1355 So. Summerlin Avenue
Orlando, FL 32806

Stephen M. Caruso, Trustee of
the Stephen M. Caruso, Jr.
Trust dated February 23, 1994
1355 So. Summerlin Avenue
Orlando, FL 32806

5. Term of the Partnership. The Partnership shall commence on July 1, 1995, and continue in existence until June 30, 2035, unless sooner terminated, liquidated or dissolved by law or in accordance with the Partnership Agreement.

IN WITNESS WHEREOF, the parties hereby have sworn to and signed and will cause to be duly filed this Amended Certificate of Limited Partnership. This Certificate is executed this 13th day of February, 1996, to amend the original Certificate of Limited Partnership filed on June 22, 1995, effective July 1, 1995.

GENERAL PARTNERS:

James P. Caruso
James P. Caruso

Austin A. Caruso, Jr.
Austin A. Caruso, Jr.

Stephen M. Caruso
Stephen M. Caruso

STATE OF FLORIDA
COUNTY OF Duval

The foregoing instrument was acknowledged before me this 13 day of February, 1996, by JAMES P. CARUSO. Said person did not take an oath and (check one) ☒ is personally known to me,

☐ produced a driver's license as identification, or ☐ produced other identification, to wit: _____.

SUSAN SHAW BRUCE
Notary Public, State of Florida
My Comm. Expires Sept. 19, 1999
Comm. No. CC492188

Susan Shaw Bruce
Print Name: Susan Shaw Bruce
Notary Public - State of Florida
Commission Number:
My Commission Expires:

STATE OF FLORIDA
COUNTY OF Orange

The foregoing instrument was acknowledged before me this 13 day of February, 1996, by AUSTIN A. CARUSO, JR. Said person did not take an oath and (check one) ☒ is personally known to me, ☐ produced a driver's license as identification, or ☐ produced other identification, to wit: _____.

SUSAN SHAW BRUCE
Notary Public, State of Florida
My Comm. Expires Sept. 19, 1999
Comm. No. CC492188

Susan Shaw Bruce
Print Name: Susan Shaw Bruce
Notary Public - State of Florida
Commission Number:
My Commission Expires:

FILED
56 MAR -1 1996
MAR 1 1996
MAR 1 1996

STATE OF FLORIDA
COUNTY OF Orange

The foregoing instrument was acknowledged before me this 13 day of February, 1996, by STEPHEN M. CARUSO. Said person did not take an oath and (check one) ☒ is personally known to me, ☐ produced a driver's license as identification, or ☐ produced other identification, to wit: _____.

SUSAN SHAW BRUCE
Notary Public, State of Florida
My Comm. Expires Sept. 19, 1999
Comm. No. CC492188

Susan Shaw Bruce
Print Name: Susan Shaw Bruce
Notary Public - State of Florida
Commission Number:
My Commission Expires: