APPLICATION FOR
REINSTATEMENT
FOR
AITED PARTNERSHI



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

FILED 10/8 99 OCT -6 PH 2: 57 Katherine Harris

1. transport of the Participation of the Participat							SECRETARY OF STATE				
1521	n Manor Dolphir es, FL 3	ı Lane	Apartm	ents, L	P •		TALLAHASSE	E PLUNIO E IN THIS SPACE	•••		
2. Marrid Adamson			3. Principal	Office Address		4. Da	le Formed or Registered Do Business in Florida		· · · · · · · · · · · · · · · · · · ·		
(105 Ma	nor Blvd	l	To	1996				
Site Aut # et			Suite Apt #, e	tc		5. FEI	Number		Applied For		
City & State		-	City & State			 - 43	-1734916		Not Applicable		
Naples, F	т.	1	Naples FL			6.	6.				
7,	Country		Sib	Cou	ntry	CERT	IFICATE OF STATUS DESIF		a Certificate of Status		
34102	USA		34104	US	:A	7. Sta	te or Country of Formation	lissou	ri		
8a. Clast's Condition of the Record of the R	712.00 Contributions in			\$437.50, for <u>each</u> Supplemental Fee Penalty Fee(8): \$5	year due this offic (a): \$86.75 for ea 00 penalty fee fo	ce. <u>Ioh year due</u> this office, b r <u>each year report torm i</u> e	nt entered in 8b, with a minim eginning with 1992 calendar y I delingwant. supplemental affidavit must b	rear.			
9.	Name and Address	s of Current Reg	gistered Agent			10.	10. If changed, new registered agent/office				
for the purpose of agent Tam familia ScSNATURE (Registered Ag	Naple ovisions of sections: changing its register in with, and accept it	red office or regis ne obligations of s pintment)	0 192 Florida Si tered agent, or section 620 192	both, in the State of F Florida Statutes.	Suite, Apt. City med limited partr florida. Such cha	nership organized or reg inge was authorized by i	istered under the laws of the is general partner(s). I hereb	FL State of Florida y accept the app	pointment of registered		
A GENERAL	PAHINEH					VE WITH TH	HIP OR OTHER S OFFICE.	BUSINE	SS ENTITY		
11. Names of Gene	eral Parlner(s)		Address of Each General Partne (Do NOT Use Post Office Box Num			City, State and Zip Code		11a. ₍	Registration Document Number		
Saxon Development I, Inc			. 1521	Dolphin	Lane	_	FL 34102 SOOOO30 -10/13/5 ***1035	1366	00001757 661 95005 *1035.00		

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

12.	1 65 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 or
	the annual report is true and accurate and that my signature shall have the same legal effects as if made under eath. I further certify that I arm a General Partner of the limited partnership, receiver or trust
	empuwered to execute this report as required by chapter 620, Florida Statutes

CR2E039 (12/98)