

APPLICATION FOR
REINSTATEMENT
FOR
LIMITED PARTNERSHIP



FLORIDA DEPARTMENT OF
REVENUE
DIVISION OF CORPORATIONS

99 APR 27 PM 1:55

A9700000695

DOCUMENT #

1. Name of Limited Partnership
CM Partners, Ltd.

A9700000695

4/16/99

MK 4/27/99

99 APR 27 PM 1:55

2. Mailing Address

12301 Park Avenue

Suite, Apt. #, etc.

3. Principal Office Address

12301 Park Avenue

Suite, Apt. #, etc.

4. Date Forwarded Registered
To the Business Center

3/25/97

5. FID Number

59-343-3902

City & State

Windermere, FL

City & State

Windermere, FL

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required
for a Certificate of Status

Zip

34786

Country

Orange (U.S.)

Zip

34786

Country

Orange (U.S.)

7. State or Country of Formation

Florida

8a. Capital Contributions as Shown
on Record

\$1,250,000.00

8b. Amount of Capital Contributions in
FLORIDA to date

\$1,238,205.70

FEES: 1)

Filing Fee(s) Computed at a rate of \$7 per \$1,000 on amount entered in 8b with a minimum filing fee of \$52.50 and a maximum of \$437.50 for each year due this office

2) Supplemental Fees \$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

9. Name and Address of Current Registered Agent

**KP&L Services, Inc.
390 N. Orange Avenue
Suite 600
Orlando, FL 32801**

10. If changed, new registered agent's name

Joseph R. Panzl, Esq.

Street Address (P.O. Box Number is Not Acceptable)

111 N. Orange Avenue

Suite, Apt. #, etc.

Suite 900

City

Orlando

Zip Code

FL 32801

10a. Pursuant to the provisions of Sections 620.10(1) and 620.19(1), Florida Statutes, the above named limited partnership (organization) or registered fund 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 the general partnership. Thereby accept the appearance of registered agent. I am familiar with and accept the obligations of section 620.19(2), Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

Joseph R. Panzl

DATE **4/26/99**

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)

CH-MO, Inc.

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

12301 Park Avenue

City, State, and Zip Code

Windermere, FL 34786

11a. Registered Business Number

P97000026549

REINSTATEMENT

1999

Adm 500

AR 437.50

AR SUPP 88.75

1026.25

REINSTATEMENT

1999

MK

500002853805-1

-04/27/99-01076-024

*****1176.25 ***1026.25**

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)(a), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(a) in the event that the information supplied is deemed exempt from public access. I further certify that the information provided 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, as set out in the report, and am empowered to execute this report as required by Chapter 620, Florida Statutes.

CH-MO, Inc.

SIGNATURE By *Edward J. Moriarty*, President

DATE **4/26/99**

Typed or Printed Name of General Partner Signing Form

CH-MO, Inc.

Telephone Number **407-799-8888**

CR2E009 (1-2/99)