A29298

City/State/Zij	estor's Name Oph Tivnice Address L 34481 Phone #	Office Use Only
CORPORATION NA	AME(S) & DOCUMENT NUMBER	K(S), (if known):
1. UUK HII	1) ASSOCIATES LT	人 ,
2. (Corpora	ation Name) (Documer	nt #)
3(Corpora	ation Name) (Documer	nt #)
4(Corpora	ation Name) (Documer	nt #)
Walk in Mail out	Pick up time [Will wait Photocopy [Certified Copy Certificate of Status
NEW FILINGS	AMENDMENTS	4000028825848 -05/21/9901080015
Profit	Amendment	-05/21/35 01300 *****35.00 ******35.00
NonProfit	Resignation of R.A., Officer/Director	
Limited Liability	Change of Registered Agent	DIV. 999
Domestication	Dissolution/Withdrawal	
Other	Merger	SION OF A
OTHER FILINGS	REGISTRATION/ QUALIFICATION	LED LY OF STATE CORPORATION PM 4: 02
Annual Report	Foreign	NTION O2
Fictitious Name	Limited Partnership	<u> </u>
Name Reservation	Reinstatement	
	Trademark	- •
-	Other	A29298
L	1	MAYA48

Examiner's Initials

CR2E031(1/95)

LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. OAK Run ASSOCIATES, LTD Name of the limited partnership
Name of the limited partnership
2. 12-06-89 Date of filing/registration in Florida 3. A 29298 Document number assigned
4. The name of the registered agent and the registered office address as shown on the records of the Florida Development & Construction Corporation of America Name 8865 SW 104th Lawe Address
OCALA, FL 3LPLOS / City, State and Zip
5. The name and address of the new registered agent and/or office:
Development & Construction Corporation OF AMERICA Name 11637 SW 90th Terrace Florida street address (P.O. Box not acceptable) OCALA City, State and Zip 6. Such change(s) was/were authorized by the general partners. Develop ment - & Construction Corporation of America
Signature of General Partner
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.
Signature of Registered Agent Signature of Registered Agent
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

Filing Fee: \$35.00