

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED
PARTNERSHIP
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # A00000002002

1. Name of Limited Partnership

SCHONTAG PARNELL LTD

2. Principal Office Address

1845 Ken McLeod Rd

Suite, Apt. #, etc.

City & State

WAUCHULA, FL

Zip

33873

Country

USA

3. Mailing Office Address

P O Box 429

Suite, Apt. #, etc.

City & State

WAUCHULA, FL

Zip

33873

Country

USA

BR

CR2E039 (11/05)

4. Date Formed or Registered To Do Business in Florida 12/22/2000

5. FEI Number

90-0035199

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name

EDWARD S SCHONTAG JR

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

1845 Ken McLeod Rd

Suite, Apt. #, Etc.

City WAUCHULA

State

FL

Zip Code

33873

7. FEES:

Filing Fee(s): \$411.25 for each year due this office.

Supplemental Fee(s): \$88.75 for each year due this office.

Penalty Fee(s): \$500 for each year or part thereof limited partnership revoked on our records

9. Pursuant to the provisions of section 620.1810 or 620.1909, Florida Statutes, I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of Chapter 620, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

Edward S. Schontag Jr

(REGISTERED AGENT MUST SIGN)

DATE 5-2-2006

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

10. Name(s) of General Partner(s)

EDWARD S SCHONTAG, JR

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

1845 KEN MCLEOD RD

City, State and Zip Code

WAUCHULA, FL 33873

WAUCHULA, FL 33873

10a. Registration Document Number

NR

REINSTATEMENT 2001-2006

900074614799
05/15/06--01008--010 **3000.00

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

11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Chapter 119, F.S. 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 empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

Edward S. Schontag Jr
Edward S Schontag Jr

DATE

5-2-06

Typed or Printed Name of General Partner Signing Form

Telephone Number

863-

FILED
2006 MAY - 8 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A00000002002

Manley & Associates, CPA's, P.A.

203 South Seventh Avenue, Wauchula, Florida 33873

863.773.6768 Fax: 863.773.4578

Certified Public Accountants

May 2, 2006

Florida Secretary of State
Division of Corporations
ATTN: Partnership Section
PO Box 6327
Tallahassee, FL 32314

BK

FILED
2006 MAY -8 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dear sir or madam,

Attached is a partnership reinstatement form for Schontag Parnell, LTD.

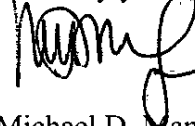
The new general partner is Edward S. Schontag, Jr. This partnership was set up in 2000 and dissolved in 2001.

The prior general partner was Edward S. Schontag, Sr. Mr. and Ms. Edward S. Schontag, Sr. have always been diligent about bringing all government forms to our office when received. They do not remember receiving any forms from your department. They also did not bring any forms to our office. This is further complicated by illnesses that happened to both Mr. and Ms. Schontag during this same time frame. We cannot explain why the annual report was not filed. Whatever the reason, the lack of filing was an unintentional oversight of the partner.

Accordingly, we respectfully request the penalty portion of the reinstatement be waived by the Department of State. The partnership has attached a check paying the \$3,000.00 of total annual fees from the date of dissolution to present. We will work with the partnership to make sure this does not happen again in the future.

Thank you for your cooperation in this matter. We look forward to receiving your response. We apologize any inconvenience this may have caused.

Sincerely yours,



Michael D. Manley, CPA