

CCRS
103 N. MERIDIAN STREET, LOWER LEVEL
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: CINDY HICKS

DATE: 4-5-01

REF. #: 0174.15248

CORP. NAME: ACADEMY PARK ASSOCIATES, LTD.

- | | | |
|--|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input checked="" type="checkbox"/> LIMITED PARTNERSHIP | <input type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | <input type="checkbox"/> UCC-1 | <input type="checkbox"/> UCC-3 |
| <input type="checkbox"/> OTHER: _____ | | |

STATE FEES PREPAID WITH CHECK# 15363 FOR \$ 1837.50

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

200003960282--4
-04/05/01--01017--010
***1837.50 ***1837.50

COST/LIMIT: \$ 5

PLEASE RETURN:

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

SL 4/5

FILED
01 APR -5 AM 11:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
01 APR -5 AM 10:09
DIVISION OF CORPORATION

CERTIFICATE OF LIMITED PARTNERSHIP

ACADEMY PARK ASSOCIATES, LTD.,
a Florida limited partnership

The undersigned general partner desiring to form a limited partnership ("Partnership") pursuant to the Florida Revised Uniform Limited Partnership Law as set forth in Chapter 620 of the Florida Statutes, does hereby state the following:

1. The name of the Partnership is:

ACADEMY PARK ASSOCIATES, LTD.

2. The mailing address of the Partnership is:

240 South Pineapple Avenue
Tenth Floor
Sarasota, Florida 34236

3. The principal office address of the Partnership is:

240 South Pineapple Avenue
Tenth Floor
Sarasota, Florida 34236

4. The name and address of the registered agent of the Partnership is:

Charles Knowles
4034 Roberts Point Road
Sarasota, Florida 34242

5. The name and address of the general partner of the Partnership is:

David S. Band
240 South Pineapple Avenue
Tenth Floor
Sarasota, Florida 34236

6. The Partnership shall have a perpetual existence, except as otherwise provided by law or in accordance with the Limited Liability Limited Partnership Agreement.

FILED
01 APR -5 AM 11:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7. The effective date of this Partnership shall be the effective date of the filing of this Certificate of Limited Partnership with the Department of State.

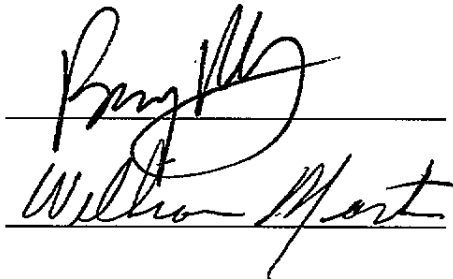
The execution of this Certificate of Limited Partnership by the undersigned general partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed by David S. Band, general partner of ACADEMY PARK ASSOCIATES, LTD., a Florida limited partnership, this 18 day of February, 2001.

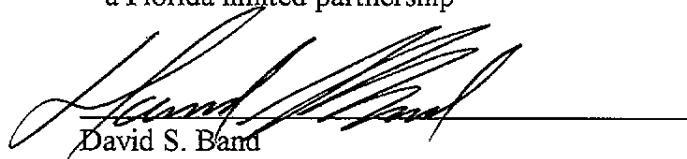
FILED
01
5-5
FEBRUARY
2001
TALLAHASSEE
FLORIDA

WITNESSES:

ACADEMY PARK ASSOCIATES, LTD.,
a Florida limited partnership



Wilton Mott



David S. Band

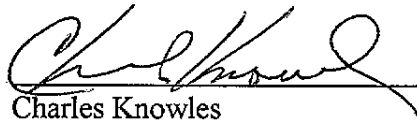
"GENERAL PARTNER"

ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

ACADEMY PARK ASSOCIATES, LTD.,
a Florida limited partnership

Having been named to accept service of process for ACADEMY PARK ASSOCIATES, LTD., a Florida limited partnership, at the place designated in the foregoing Certificate of Limited Partnership, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I accept the duties and obligations of Section 620.192 of the Florida Statutes.

Date: FEB 28 2001


Charles Knowles

"REGISTERED AGENT"

FILED
01 APR -5 AM 11:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF FLORIDA
COUNTY OF SARASOTA

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

ACADEMY PARK ASSOCIATES, LTD.,
a Florida limited partnership

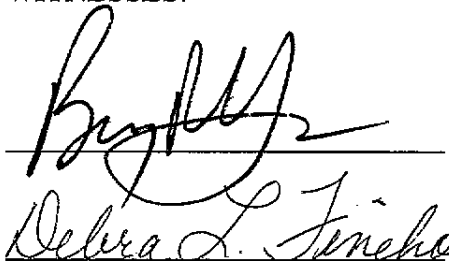
BEFORE ME, the undersigned Notary Public, personally appeared David S. Band, as general partner of ACADEMY PARK ASSOCIATES, LTD., a Florida limited partnership, ("Partnership,") who, upon being duly sworn, certified as follows:

1. The amount of the capital contributions of the limited partners of the Partnership is: \$1,065,000.00.
2. The amount of additional capital contributions of the limited partners of the Partnership anticipated is: \$0.

Under penalties of perjury, I declare that I have read the foregoing and that the facts alleged are true, to the best of my knowledge and belief.

WITNESSES:

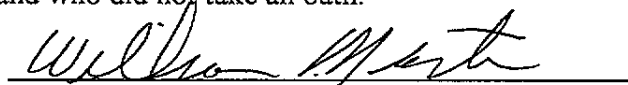
ACADEMY PARK ASSOCIATES,
a Florida limited partnership


Delora L. Finchoat


David S. Band

"GENERAL PARTNER"

The foregoing instrument was acknowledged before me, this 28 day of February, 2001, by David S. Band, as general partner of ACADEMY PARK ASSOCIATES, LTD., a Florida limited partnership, who is personally known to me and who did not take an oath.


Notary Public
Print Name WILLIAM MARTIN

My Commission Expires _____



WILLIAM MARTIN
Notary Public, State of Florida
My Comm. Exp. Aug. 18, 2001
Comm. No. CC 672411

FILED
91 APR -5 AM 11:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA