PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITEO ~ 3 **PARTNERSHIP** REINSTATEMENT



FLORIDA DEPARTMENT, OF STATE Secretary of State

DIVISION OF CORPORATIONS

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DOCUMENT # A 01000000594

1. Name of Limited Partnership

Hartland Pty., Ltd.

			1014 000	<u> </u>	
2. Principal Office Address 107 North Beach Road	3. Mailing Office Addre		4. Date Formed or Registered To Do Business in Florida May 1		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. FEI Number 65–1102421	Applied For Not Applicable	
City & State Hobe Sound, Florida	City & State Hobe Sound, Florida		6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status		
Zip Country USA	^{Zip} 33455	Country USA	7a. Capital Contributions as shown on Re		
8. Name and Addre	ess of Current Registered Age	7b. Amount of Capital Contributions in FLORIDA to date: \$1,000,000			
Name Charles E. Muller II			FEES: 1.) Filling Fee(s): Computed at a rate of \$7 pe		
Street Address (P.O. Box Number is Not Acceptable) 9350 South Dixie Highway			in 7b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office. 2.) Supplemental Fee(s): \$88.75 for each year due this office, beginning		
Suite, Apt. #, Etc. Suite 1550		 with 1992 calendar year. 3.) Penalty Fee(s): \$500 penalty fee for <u>each year report form is delinquent</u>. Note: If the amount entered in 7b is greater than amount entered in 			
City Miami	State FL	Zip Code 33156	7a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.		

Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered 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 its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

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

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10. Name(s) of General Partner(s)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	City, State and Zip Code	10a. Registration Document Number		
Hartland Management, Inc.	107 North Beach Road	Hobe Sound, FL 33455	P: 01000033818		
-		2000 0911 11/20/02-01066-0	2532 07 **526.25		

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 filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(i) 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

Hartland Management, DATE Christian Nast, Pres.
Typed or Printed Name of General Partner Signing Form Inc., general partner

MULLER & LIPSON, P.A.

Attorneys at Law

Charles E. Muller II
Gary D. Lipson
Brian A. Lebensburger
of counsel
Dale A. Heckerling
William C. Lewis, Jr.

9350 Financial Centre Suite 1550 9350 South Dixie Highway Miami, Florida 33156 Telephone: 305-670-6770

Fax: 305-670-6769
Writer's Direct Extension: 320

November 13, 2002

Via Certified Mail, Return Receipt Requested

Division of Corporations Attn: Partnership Section P.O. Box 6327, Tallahassee, FL 32314

> Re: VZ Partners, Ltd. Hartland Pty., Ltd.

Ladies and Gentlemen:

We have enclosed a Limited Partnership Reinstatement form fully completed and executed for each of the above-referenced limited partnerships along with a check for each limited partnership in the amount of \$526.25 representing the filing fees and supplemental fees due for each partnership for the year 2002.

These limited partnerships did not receive any of the prior notices concerning the filing of the annual reports or the fact that the same were past due. Therefore, we respectfully request that you waive the penalty fees on behalf of each limited partnership and reinstate the limited partnerships. Of course, if there are any questions, please do not hesitate to contact me at the above address.

Your attention is greatly appreciated.

Very truly yours,

CHARLES E. MULLER II

CEM:tp

Enclosures: as stated. C:\Lisa\Nast\Lenters\DivCorps-01