PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
2003 DEC 31 PM 3:04
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

LIMITED PARTNERSHIP REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # A01000001511

1. Name of Limited Partnership
Lipschutz Family Limited Partnership

2. Principal Office Address		3. Mailing Office Address	
c/o Sarasota Bay Club		c/o Sarasota Bay Club	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
1301 N. Tamiami Trail		1301 N. Tamiami Trail	
City & State		City & State	
Sarasota, Florida		Sarasota, Florida	
Zip	Country	Zip	Country
34236	USA	34236	USA

4. Date Formed or Registered To Do Business in Florida: November 8, 2001

5. FEI Number: 65-1151927 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

7a. Capital Contributions as shown on Record: 100,000.00

7b. Amount of Capital Contributions in FLORIDA to date: 1,066,398

8. Name and Address of Current Registered Agent

Name: Marion Lipschutz
Street Address (P.O. Box Number is Not Acceptable): c/o Sarasota Bay Club
Suite, Apt. #, Etc.: 1301 N. Tamiami Trail
City: Sarasota | State: FL | Zip Code: 34236

FEES:
1) Filing Fee(s): Computed at a rate of $7 per $1,000 on amount entered in 7b, with a minimum filing fee of $62.50 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 with 1982 calendar year.
3) Penalty Fee(s): $500 penalty fee for each year report form is delinquent.
Note: If the amount entered in 7b is greater than amount entered in 7a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.

9. Pursuant to the provisions of sections 620.1061 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): Marion Lipschutz DATE: December 30, 2003

CR2E056 (8/01)

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)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	City, State and Zip Code	10a. Registration Document Number
Marion Lipschutz, Trustee	1301 N. Tamiami Trail	Sarasota, Florida 34236	100017918201

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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 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 effect 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: Marion Lipschutz DATE: December 30, 2003

Typed or Printed Name of General Partner Signing Form: Marion Lipschutz, Trustee Telephone Number: 941-373-0707

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