## A0200000946

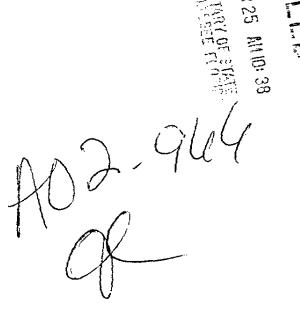
(Re	equestor's Name)	
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, PICK-UP	WAIT	MAIL
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## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: FOUR MILE COVE, Ltd.  (Name of Limited Partnership)
The enclosed Supplemental Affidavit and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
FOUR MILE COVE Ltd.  (Firm/Company)
P.O.Box 369 (Address)
Bonita Springs FL 34133 (City/State and Zip Code)
For further information concerning this matter, please call:

Grea Erdman or Linda Andreis (237) 992-8833
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314



## SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FLORIDA LIMITED PARTNERSHIP

The undersigned general partners of
FOUR MILE COUE, Ltd.
Florida Limited Partnership, executed this supplemental affidavit filed pursuant to section 620.112, Florida Statutes.
The total amount of the capital contributions of the limited partners is: $$3,946,250,00$ .
This 19th day of APRIL , 2005.
FURTHER AFFIANT SAYETH NOT.
Under penalties of perjury, I declare that I have read the foregoing and that the facts are true, to the best of my knowledge and belief.
General Partner(s)
GREG ERDMAN, FOUR MILE GOVE, Inc.

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Fees:

\$7 per \$1000, based on additional contributions

Minimum \$ 52,50 Maximum \$1750.00