
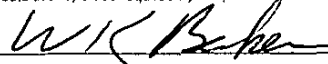


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

3,078.75
Dec. 9-26-2003

LIMITED PARTNERSHIP REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # A02000001361			
1. Name of Limited Partnership MILO THOMAS FAMILY LIMITED PARTNERSHIP LTD 14153 U S 41 SOUTH BROOKSVILLE, FL. 34610			
2. Principal Office Address 13623 N FLORIDA AVE		3. Mailing Office Address 13623 N FLORIDA AVE	
Suite, Apt. #, etc. BLDG 2		Suite, Apt. #, etc. BLDG 2	
City & State TAMPA, FL		City & State TAMPA, FL	
Zip 33613	Country USA	Zip 33613	Country USA
4. Date Formed or Registered To Do Business in Florida 10/11/02			
5. FEI Number 33-1033178		Applied For <input type="checkbox"/> Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status			
7a. Capital Contributions as shown on Record: \$20,000,000			
7b. Amount of Capital Contributions in FLORIDA to date: \$9,000,000			
8. Name and Address of Current Registered Agent			
Name MILO THOMAS			
Street Address (P.O. Box Number is Not Acceptable) 14153 41 SOUTH			
Suite, Apt. #, Etc.			
City BROOKSVILLE		State FL	Zip Code 34610
9. 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 10/19/05	
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
THOMAS, MILO	14153 U S 41 SOUTH	BROOKSVILLE, FL 34610	
BAKER, W KENDALL	13623 N FLORIDA AVE	TAMPA, FL 33613	
FUENTES, LAWRENCE E	1407 W BUSCH BOULEVARD	TAMPA, FL 33612	
			300062014273 12/08/05--01035--001 **526.25 REINSTATEMENT 03-05 12/08/05--01035--002 **100000 no penalty fee
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 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 		DATE 10/20/04	
Typed or Printed Name of General Partner Signing Form W K BAKER		Telephone Number	

BAKER & MYERS
CERTIFIED PUBLIC ACCOUNTANTS
13675 NORTH FLORIDA AVENUE
TAMPA, FLORIDA 33613
(813) 961-0530
FAX (813) 963-1786

MEMBER
AMERICAN INSTITUTE OF CERTIFIED
PUBLIC ACCOUNTANTS
FLORIDA INSTITUTE OF CERTIFIED
PUBLIC ACCOUNTANTS

WM. KENDALL BAKER, C.P.A.
STEVEN L. MYERS, C.P.A.

October 20, 2005

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


Re: Milo Thomas Family Limited Partnership LTD
14153 U S 41 South
Brooksville, FL 34610
FEI Number - 33-1033178

Please find enclosed Limited Partnership Reinstatement form for the above referenced partnership with a check in the amount of \$1,052.50 to cover the reinstatement fees.

The partnership has not received a notice of fees due from the State of Florida because there is no mail delivery to the Brooksville, FL address. For this reason the fees were not paid. We respectfully request the penalty be abated, as failure to pay fees when due was not intentional.

Thank you for your consideration in this matter.

Respectfully,


W K Baker, CPA

Enclosures

WKB/Jp

BAKER & MYERS
CERTIFIED PUBLIC ACCOUNTANTS
13623 NORTH FLORIDA AVENUE
TAMPA, FLORIDA 33613
(813) 961-0530
FAX (813) 963-1786

WM. KENDALL BAKER, C.P.A.
STEVEN L. MYERS, C.P.A.

MEMBER
AMERICAN INSTITUTE OF CERTIFIED
PUBLIC ACCOUNTANTS
FLORIDA INSTITUTE OF CERTIFIED
PUBLIC ACCOUNTANTS

December 1, 2005

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


ATTN: Diane Cushing

Dear Ms. Cushing:

In accordance with our telephone conversation today, enclosed is a check in the amount of \$526.25.

Thank you for all your help.

Yours very truly,


W. K. Baker