

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM **FILED**

**LIMITED
PARTNERSHIP
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

13 APR 18 PM 12:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A03000000340

1. Name of Limited Partnership

PINE MEADOWS ASSOCIATES, LTD.

700246990127
04/18/13--01033--008 **2000.00

2. Principal Office Address - No P.O. Box #
2801 Alaskan Way

3. Mailing Office Address
2801 Alaskan Way

Suite, Apt. #, etc.
200

Suite, Apt. #, etc.
200

City & State
Seattle, WA

City & State
Seattle, WA

Zip
98121

Country
USA

Zip
98121

Country
USA

REINSTATEMENT 12-13

4. Date Formed or Registered
To Do Business In Florida **02/28/2003**

5. FEI Number **820588658**

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required for a Certificate of Status

B. Name and Address of Current Registered Agent

Name
CORPORATION SERVICE COMPANY

Street Address (P.O. Box Number is Not Acceptable)
1201 HAYS STREET

Suite, Apt. #, Etc.

City
TALLAHASSEE

FL Zip Code
32301

7. FEES:
Filing Fee(s): \$411.25 for each year due this office.
Supplemental Fee(s): \$88.75 for each year due this office.
Penalty Fee(s): \$500 for each year or part thereof limited partnership revoked on our records.

E-mail Address:

rfoster@pinnaclefamily.com

E-Mail address to be used for future annual report notices.

9. Pursuant to the provisions of section 620.1810 or 620.1909, Florida Statutes, I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of Chapter 620, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

Maurice Caldwell, Sr.
(REGISTERED AGENT MUST SIGN)

DATE **3/20/13**

**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
CAH-IDA PINE MEADOWS LLC	2801 Alaskan Way, Suite 200	Seattle, WA 98121	M07000005171

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 exemptions contained in Chapter 119, Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Chapter 119, F.S. 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. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE

Stanley J. Harrelson

DATE **3/25/13**

CAH-IDA PINE MEADOWS LLC by its Manager, Stanley J. Harrelson

Typed or Printed Name of General Partner Signing Form

Telephone Number