

# 2007 LIMITED PARTNERSHIP REINSTATEMENT

DOCUMENT # A04000000874

1. Entity Name  
J A P FAMILY LIMITED PARTNERSHIP, LTD.



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

07 OCT -5 AM 9:25

Principal Place of Business  
1624 S.E. 2ND STREET  
CAPE CORAL, FL 33990

Mailing Address  
1624 S.E. 2ND STREET  
CAPE CORAL, FL 33990

2. Principal Place of Business - No P.O. Box #  
1304 NE 3<sup>rd</sup> TER  
Suite, Apt. #, etc.

3. Mailing Address  
1304 NE 3<sup>rd</sup> TERRACE  
Suite, Apt. #, etc.



09242007 REIN-LP CR2E100 (1/07)

City & State  
Cape Coral FL  
Zip 33909 Country U.S.

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Zip 33909 Country U.S.

4. FEI Number  
14-1909508  
Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

PAULINO, JHON H  
1624 S.E. 2ND STREET  
CAPE CORAL, FL 33990

## 7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

8. 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 *Jhon H. Paulino*  
Signature, typed or printed name of registered agent and title if applicable. (REGISTERED AGENT MUST SIGN)

DATE  
9/24/07

FILE NOW!!! FEE IS \$500.00  
After January 1, 2008, Fee will be \$1000.00

In accordance with s. 607.193(2)(b), F.S.,  
the limited partnership did not receive the  
prior notice.

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

## 12. GENERAL PARTNER INFORMATION

DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
	PAULINO, JHON H	1624 S.E. 2ND STREET	CAPE CORAL, FL 33990
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## 13. ADDRESS CHANGES ONLY

STREET ADDRESS	1304 NE 3 <sup>rd</sup> TERRACE
CITY-ST-ZIP	CAPE CORAL FL 33909
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	700110525057
CITY-ST-ZIP	10/09/07--01024--015 **\$500.00
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

REINSTATEMENT 2007

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: *Jhon H. Paulino*