

A07195

ATTORNEYS' TITLE

Requestor's Name

660 E. Jefferson St.

Address

Tallahassee, FL 32301

City/St/Zip

850-222-2785

Phone #

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1- STONEWOOD APARTMENTS, LTD.

2-

3-

4-

99 DEC 28 PM 1:58
DIVISION OF CORPORATIONS
FLORIDA DEPT. OF STATE

☒ Walk-in

☐ Pick-up time ASAP

☐ Certified Copy

☐ Mail-out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS

<input checked="" type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

700003072127--1
-12/16/99--01006--011
****210.00 *****52.50

OTHER FILINGS

<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION

<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

(8)

OK 12/28/99

LP-52.50

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

December 16, 1999

ATTORNEYS' TITLE

TALLAHASSEE, FL

SUBJECT: STONEWOOD APARTMENTS, LTD.
Ref. Number: A07195

We have received your document for STONEWOOD APARTMENTS, LTD. and check(s) totaling \$52.50. However, the document has not been filed and is being retained in this office for the following reason(s):

STONEWOOD APARTMENTS, LTD. was revoked on April 16, 1999, because it failed to file the 1999 Annual Report.

To reinstate at this time, the partnership must pay a \$500.00 penalty fee and the 1999 Annual Report fee.

Assuming that the contribution amount reported in Item 8-B will be \$600,000.00, the partnership's annual report fee would be \$526.25, and the TOTAL AMOUNT REQUIRED TO REINSTATE would be \$1,026.25.

Please note that all these fee amounts will increase if the reinstatement is not filed before December 31, 1999.

Please return the AMENDMENT with your reinstatement.

Also, please note that we have RETAINED your \$52.50 payment.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6914.

Buck Kohr
Corporate Specialist

Letter Number: 399A00059110

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DIVISION OF CORPORATIONS
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RECEIVED
99 DEC 28 AM 11:29

CERTIFICATE OF AMENDMENT TO
LIMITED PARTNERSHIP AGREEMENT AND
CERTIFICATE OF LIMITED PARTNERSHIP OF
STONEWOOD APARTMENTS, LTD., A FLORIDA LIMITED PARTNERSHIP

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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In accordance with Section 620.101 of the Florida Statutes the undersigned, desiring to further amend the Certificate of Limited Partnership and Limited Partnership Agreement (the "Certificate") for the above-named Florida limited partnership (the "Partnership"), hereby certify as follows:

1. Name. The name of the Partnership is Stonewood Apartments, Ltd.

2. Filing of Certificate. The Certificate was filed on January 16, 1979, with the Florida Secretary of State; was amended by Certificate of Amendment to Limited Partnership Agreement filed March 31, 1982; was further amended by Certificate of Amendment to Limited Partnership Agreement filed April 16, 1982; was further amended by Certificate of Correction to Limited Partnership Amendment filed January 12, 1989; was further amended by Amendment to Limited Partnership Certificate, filed April 13, 1989; was further amended by Certificate of Amendment to Change Registered Agent, dated April 6, 1990; was further amended by Certificate of Amendment dated August 29, 1991; and was finally amended by Certificate of Amendment dated February 12, 1992.

3. Amendment. The Certificate as amended, is hereby amended as follows:

a) In accordance with Article VII of the Limited Partnership Agreement as amended, Paul M. Dodd, Jr., hereby sells, assigns and transfers his interest in the Limited Partnership to THE PAUL M. DODD, JR., FAMILY TRUST (restated July 13, 1999) PAUL M. DODD, JR. and HARRIET H. DODD, CO-TRUSTEES.

b) Paul M. Dodd, Jr. hereby withdraws as a limited partner of the partnership.

c) THE PAUL M. DODD, JR. FAMILY TRUST (restated July 13, 1999) PAUL M. DODD, JR., and HARRIET H. DODD, CO-TRUSTEES is hereby substituted as a Limited Partner in place of the withdrawing Limited Partner, PAUL M. DODD, JR.

4. The foregoing Certificate of Amendment is hereby adopted by all of the members of the Partnership, and has been executed by the General Partner, withdrawing limited partner, the substituted limited partner and by all limited partners. This withdrawal and substitution is effective on the filing of this Certificate of Amendment for record at the office of the Department of State of the State of Florida, and on such filing the withdrawal of PAUL M.

DODD, JR. and substitution of THE PAUL M. DODD, JR. FAMILY TRUST (restated July 13, 1999) PAUL M. DODD, JR., and HARRIET H. DODD, CO-TRUSTEES as a substituted limited partner shall be deemed complete and such filing shall become a provision of the Partnership Agreement and of the Certificate of Limited Partnership.

WITNESS our hands and seals this 10th day of December, A.D., 1999.

Donny R. Lewis
Off. Not

WITHDRAWING LIMITED PARTNER:

✓ Paul M. Dodd
PAUL M. DODD, JR.

SUBSTITUTED LIMITED PARTNER:

THE PAUL M. DODD, JR. FAMILY TRUST
(restated July 13, 1999) PAUL M.
DODD, JR. and HARRIET H. DODD, CO-
TRUSTEES

Donny R. Lewis
Off. Not

✓ Paul M. Dodd
PAUL M. DODD, JR., CO-TRUSTEE
734 John Anderson Drive
Ormond Beach, FL 32176

Donny R. Lewis
Off. Not

Harriet H. Dodd
HARRIET H. DODD, CO-TRUSTEE
734 John Anderson Drive
Ormond Beach, FL 32176

GENERAL PARTNER:

STONEWOOD OF DUVAL COUNTY, INC.

Donny R. Lewis
Synette Lucas

By: Thurman Gillespy, Jr.
Thurman Gillespy, Jr., M.D.
President
1075 Mason Avenue
Daytona Beach, FL 32117

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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LIMITED PARTNERS:

Penny K. Currey
Lynette Lucas

Thurman Gillespy, Jr.
Thurman Gillespy, Jr., M.D.
1075 Mason Avenue
Daytona Beach, FL 32117

Penny K. Currey
Lynette Lucas

Willis G. Stose
Willis G. Stose, M.D.
1075 Mason Avenue
Daytona Beach, FL 32117

Penny K. Currey
Lynette Lucas

Gilbert A. Martin, Jr.
Gilbert A. Martin, Jr., M.D.
1075 Mason Avenue
Daytona Beach, FL 32117

Penny K. Currey
Kathleen E. Phillips

P. T. Fleuchaus
P. T. Fleuchaus, D.D.S., M.S.D.
855 Mason Avenue
Daytona Beach, FL 32117

Donald D. Carls
Alberta Gillespy

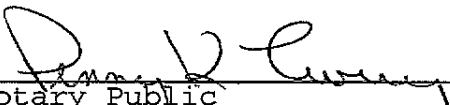
Alberta Gillespy
Alberta Gillespy
155 Aspenwood Drive
Chagrin Falls, Ohio 44022

STATE OF FLORIDA

COUNTY OF VOLUSIA

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County named above to take acknowledgements, personally appeared Thurman Gillespy, Jr., M.D., who is personally known to me and who did not take an oath.

WITNESS my hand and seal in the County and State above
named this 22 day of November, A.D., 1999.


Notary Public

SECRETARY OF STATE
DIVISION OF CORPORATIONS
99DEC 28 PM 1:58

STATE OF FLORIDA
COUNTY OF VOLUSIA



Penny K. Every
MY COMMISSION # CC821965 EXPIRES
March 29, 2003
BONDED THRU TROY FAIN INSURANCE, INC.

I HEREBY CERTIFY that on this day, before me, a Notary
Public duly authorized in the State and County named above to take
acknowledgements, personally appeared Willis G. Stose, M.D., who
is personally known to me and who did not take an oath.

WITNESS my hand and seal in the County and State above
named this 24 day of November, A.D., 1999.



Penny K. Every
MY COMMISSION # CC821965 EXPIRES
March 29, 2003
BONDED THRU TROY FAIN INSURANCE, INC.


Notary Public

STATE OF FLORIDA
COUNTY OF VOLUSIA

I HEREBY CERTIFY that on this day, before me, a Notary
Public duly authorized in the State and County named above to take
acknowledgements, personally appeared Paul M. Dodd, Jr.,
individually and as Co-Trustee of THE PAUL M. DODD, JR. FAMILY
TRUST (restated July 13, 1999) who is personally known to me and
who did not take an oath.

WITNESS my hand and seal in the County and State above
named this 15th day of November, A.D., 1999.



Penny K. Every
MY COMMISSION # CC821965 EXPIRES
March 29, 2003
BONDED THRU TROY FAIN INSURANCE, INC.


Notary Public

STATE OF FLORIDA
COUNTY OF VOLUSIA



Penny K. Every
MY COMMISSION # CC821965 EXPIRES
March 29, 2003
BONDED THRU TROY FAIN INSURANCE, INC.

I HEREBY CERTIFY that on this day, before me, a Notary
Public duly authorized in the State and County named above to take
acknowledgements, personally appeared HARRIET H. DODD, as Co-
Trustee of THE PAUL M. DODD, JR. FAMILY TRUST (restated July 13,

1999) who is personally known to me and who did not take an oath.

WITNESS my hand and seal in the County and State above
named this 15th day of November, A.D., 1999.



Penny K. Every
MY COMMISSION # CC821965 EXPIRES
March 29, 2003
BONDED THRU TROY FAIR INSURANCE, INC.

Penny K. Every
Notary Public

STATE OF FLORIDA

COUNTY OF VOLUSIA

I HEREBY CERTIFY that on this day, before me, a Notary
Public duly authorized in the State and County named above to take
acknowledgements, personally appeared Gilbert A. Martin, Jr., M.D.,
who is personally known to me and who did not take an oath.

WITNESS my hand and seal in the County and State above
named this 22 day of November, A.D., 1999.



Penny K. Every
MY COMMISSION # CC821965 EXPIRES
March 29, 2003
BONDED THRU TROY FAIR INSURANCE, INC.

Penny K. Every
Notary Public

STATE OF FLORIDA

COUNTY OF VOLUSIA

I HEREBY CERTIFY that on this day, before me, a Notary
Public duly authorized in the State and County named above to take
acknowledgements, personally appeared P. T. Fleuchaus, D.D.S.,
M.S.D., who is personally known to me and who did not take an oath.

WITNESS my hand and seal in the County and State above
named this 15th day of December, A.D., 1999.



Penny K. Every
MY COMMISSION # CC821965 EXPIRES
March 29, 2003
BONDED THRU TROY FAIR INSURANCE, INC.

Penny K. Every
Notary Public

STATE OF OHIO

COUNTY OF Cuyahoga

I HEREBY CERTIFY that on this day, before me, a Notary
Public duly authorized in the State and County named above to take

acknowledgements, personally appeared Alberta Gillespy, who is personally known to me and who did not take an oath.

WITNESS my hand and seal in the County and State above named this 10th day of December, A.D., 1999.



Notary Public

ROBERT H. GILLESPIE, Attorney at Law
Notary Public, STATE OF OHIO
Non-Expiring Commission

FILED STATE
SECRETARY OF CORPORATIONS
99 DEC 28 PM 1:58