


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

192

1999-2002
LIMITED
PARTNERSHIP
REINSTATEMENT
LEBR



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # A09288

1. Name of Limited Partnership

Alden Pines, Ltd.

2. Principal Office Address

14027 Clubhouse Drive
Suite, Apt. #, etc.

3. Mailing Office Address

P. O. Box 324
Suite, Apt. #, etc.

City & State

Pineland, Florida

City & State

Pineland, Florida

Zip

33945

Country

USA

Zip

33945

Country

USA

8. Name and Address of Current Registered Agent

Name

Barry K. Groves

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

14346 Sandarac Drive, Box 324

Suite, Apt. #, Etc.

City

Pineland

State

FL

Zip Code

33945

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 1/16/2002

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
Alden Pines, Inc.	101 Main Street	Trenton, KY	549951
Ware, Robert F.	101 Main Street	Trenton, KY	
Groves, Barry	117 Hopkinsville ST.	Trenton, KY	
Groves, Leigh	117 Hopkinsville St	Trenton, KY	

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)(f), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(f) 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

Barry K. Groves, General Partner

DATE 1/16/2002

Typed or Printed Name of General Partner Signing Form

Barry Groves, General Partner

Telephone Number 270-466-5628

FILED

2002 JAN 29 PM 4:08

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

700004912577--9
-02/13/02--01002--025

4. Date Formed or Registered
To Do Business in Florida

9/5/1980

5. FEI Number

59-2044080

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7a. Capital Contributions as shown on Record:

30,000

7b. Amount of Capital Contributions in FLORIDA to date:

FEES:

1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 7b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office.

2.) Supplemental Fee(s): \$88.75 for each year due this office, beginning with 1992 calendar year.

3.) Penalty Fee(s): \$500 penalty fee for each year report form is delinquent.

Note: If the amount entered in 7b is greater than amount entered in 7a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.

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Alden Pines, Ltd.
P. O. Box 324
Pineland, Florida 33945

January 16, 2002

Florida Department of State
Division of Corporations

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

RE: Alden Pines, Ltd. Document #A09288

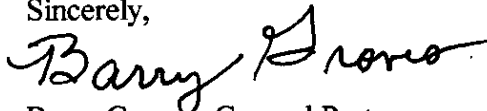
Dear Sirs,

As per a conversation today with a representative of your office, I have enclosed an application for a Limited Partnership Reinstatement on behalf of Alden Pines, Ltd. Further, I have enclosed a check in the amount of \$1,195.00 for the period of 1999 through 2002.

I have not included any penalty payments. I request that your department waive any penalties. We did not receive any forms for 1999 and consequently, were placed on the inactive status and I did not receive any further reports.

If there is further information needed, please contact me at (270) 466-5628.

Sincerely,



Barry Groves, General Partner
Alden Pines, Ltd.