## **2003 LIMITED PARTNERSHIP**

DOCUMENT # A14247  1. Entity Name ENCHANTING ACRES, A LIMITED PARTNERSHIP				AT (UBA)	SECRETARY OF STATE DIVISION OF CORPORATIONS
Principal Place of Business 3205 60TH STREET. SW NAPLES FL 34116			Mailing Address 3205 60TH STREET. 9 NAPLES FL 34116	SW	03 JAN 13 PM 4: 56
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		DUE BY MAY 1, 2003
City & State		City & State		4. FEI Number 59-2278377 Applied For	
Zip		Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional
	6. Name	and Address of Curren	Registered Agent		7. Name and Address of New Registered Agent
RIEHI A				Name	7. Haine and Address of New Registered Agent
BIEHL, MARY K 3205 60TH STREET, SW NAPLES FL 34116				Street Address	s (P.O. Box Number is Not Acceptable)
				City	Zip Code
<ol><li>The above the obligation</li></ol>	e named entity ations of registe	submits this statement for red agent.	or the purpose of changing	its registered office or regist	ered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE		_			
	Signature, typed o	r printed name of registered agent			DATE
9. Capital Contributions as Shown on record. \$410,000.00		in FLORIDA to		11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE	
	NOTE:	ENERAL PARTNER 1 General Partners MA	THAT IS A BUSINESS !  Y NOT be changed or	ENTITY MUST BE REGIS	STERED AND ACTIVE WITH THIS OFFICE. ent must be filed to change a general partner.
12.		GENERAL PARTNER	RINFORMATION	13.	ADDRESS CHANGES ONLY
DOCUMENT # NAME	G28141	NAPLES, INC.		STREET ADDRESS	
STREET AODRESS	3205 60TH NAPLES FL	STREET, SW		City-st-zip	
OCUMENT #	TWO CEOTE	04710		STREET ADDRESS	
TREET ADDRESS				CITY-ST-ZIP	
DCUMENT #			<u> </u>	STREET ADDRESS	01713/03-01085-007 **526.25-
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I	- 15 G			STREET ADDRESS	\$3 V 16 B

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:**