

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED
PARTNERSHIP
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

2004 DEC 17 P 4: 13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A16548

1. Name of Limited Partnership

INN ON THE LAKE, LTD.

2. Principal Office Address

1859 Bear Creek Cove

Suite, Apt. #, etc.

3. Mailing Office Address

same

Suite, Apt. #, etc.

City & State

Longwood, FL

City & State

same

Zip

32779

Country

USA

Zip

same

Country

same

**4. Date Formed or Registered
To Do Business in Florida**

03/05/1984

5. FEI Number

592378724

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ **XXX**

**\$8.75 Additional Fee required
for a Certificate of Status**

7a. Capital Contributions as shown on Record:

\$450.00

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

\$450.00

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.

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)

Robert O. Marks

DATE 12/14/2004

**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)

Catmero, N.V., Inc.

**Address of Each General Partner
(Do NOT Use Post Office Box Numbers)**

Front St. 7,
Philipsburg

City, State and Zip Code

Saint Maarten, N.V.

**10a. Registration
Document Number**

P02556

900043589759
12/22/04--01051--012 **6421.25

REINSTATEMENT

AS-204
dec

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

Catmero N.V. by Burton R. Chasnov, VP

DATE

12/14/04

Typed or Printed Name of General Partner Signing Form

Catmero, N.V., by Burton R. Chasnov, VP
Inc.

Telephone Number

407)862-4682

CR2E039 (10/02)

SMITH MACKINNON, PA

ATTORNEYS AT LAW

W. KELLY SMITH
ALEXANDER C. MACKINNON
JOHN P. GREELEY
ROBERT O. MARKS
C. YANKI SOKMENSUER
KEVIN K. SMITH

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CITRUS CENTER
255 SOUTH ORANGE AVENUE
ORLANDO, FLORIDA 32801

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ORLANDO, FLORIDA 32802-2254

TELEPHONE (407) 843-7300
FACSIMILE (407) 843-2448

December 14, 2004

State of Florida
Department of State
Division of Corporations
Attention: Partnership Section
409 East Gaines Street
Tallahassee, Florida 32399

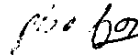
RE: Inn on the Lake, Ltd., a Florida Limited Partnership

Ladies and Gentlemen:

Please find enclosed one original, executed Reinstatement form plus my firm's check number 008142, in the amount of \$6421.25, representing reinstatement fees.

Any questions, acknowledgement, etc. should be forwarded to my attention.

Sincerely,



Robert O. Marks

ROM/pbo
via Federal Express
enclosures