

APPLICATION FOR
REINSTATEMENT
FOR
LIMITED PARTNERSHIP



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

FILED

SEP 29 1999

SECRETARY OF STATE

DO NOT WRITE IN THIS SPACE

DOCUMENT # A17763

1. Name of Limited Partnership:

Forest Place, Ltd. *nic Filed 4-24-99*
Forest Place Apartments, Ltd.

2. Mailing Address:

2431 Aloma Avenue

Suite, Apt. #, etc.

City & State:

Winter Park, FL

Zip

32792

Country

Orange

3. Principal Office Address:

2431 Aloma Avenue

Suite, Apt. #, etc.

City & State:

Winter Park, FL

Zip

32792

Country

Orange

8a. Capital Contributions as Shown on Record

\$1,310,254.96

8b. Amount of Capital Contributions in FLORIDA to date:

\$1,310,254.96

FEES: (1)

Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 8b, 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 8b is greater than amount entered in 8a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.

9. Name and Address of Current Registered Agent

Helling, Dale D.

2431 Aloma Avenue

Winter Park, FL 32792

10. If changed, new registered agent (affidavit)

Name

Street Address (P.O. Box Number in FL is acceptable)

Suite, Apt. #, etc.

City

FL

Zip Code

10a. Pursuant to the provisions of sections 620.10(1) 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)

Dale D. Helling

DATE 4/27/99

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Names of General Partner(s)

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

City, State and Zip Code

11a. Registrar Document Number

Janco Financial Services, Inc. 2431 Aloma Avenue

Winter Park, FL: 32792

P95000064242

FF \$2,052.50

4000002856124--5

-04/29/99--01046--001

***2105.00 ***2052.50

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. 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)(c), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) 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 or our own. 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

Dale D. Helling

DATE 4/27/99

Typed or Printed Name of General Partner Signing Form

Dale D. Helling, President - Janco Financial Services, Inc. General

Telephone Number

(407) 678-1106

CR2E039 (12/98)