PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

					i	
LIMITED PARTNERSHIP REINSTATEMENT PARTNERSHIP R						10 SEP -3
DOCUMENT # A20503 1. Name of Limited Partnership						S PA
SAENGER THEATRE PARTNERSHIP, LTD.						2.35
Principal Office Address 1800 Post Oak E	ess - No P.O. Box # Blvd., 6 Blvd. Place	Mailing Office Address 1800 Post Oak Blvd., 6 Blvd. Place		ace	CR2E03:	9 (05/10)
Suite, Apt. #, etc. Suite 450		Suite, Apt. #, etc. Suite 450			Date Formed or Registered To Do Business in Florida 08/05/1985	
City & State Houston, TX		City & State Houston, TX			5. FEI Number 59-2574288	Applied For Not Applicable
77056	Country USA	^{Zip} 77056	Country USA		6. CERTIFICATE OF STATUS DESIRED	\$8.75 Additional Fee required for a Certificate of Status
	8. Name and Address of	Current Registered Ager	nt		7. FEES:	
Name Capitol Corporate Services, Inc.				Filing Fee(s): \$411.25 for each year due this office.		
				Supplemental Fee(s): \$88.75 for Penalty Fee(s): \$500 for each yea	•	
Street Address (P.O. Box Number is Not Acceptable) 155 Office Plaza Drive, Suite A						ed on our records.
Suite, Apt. #, Etc.					gering of the profile of the second of the Se	Time of the sta
ÇİY TALLAHASSEE	50 101 101 10 NO NO	State 32301 Zip Code			900 (8505348 9 .:.67.61.63:66 **85*.5	
9. Pursuant to the provisions of section 620,1810 or 620,1909. Florida Statutes, I hereby accept the appointment of registered agent, I am familiar with, and accept the obligations of Chapter 620. SIGNATURE (Registered Agent Accepting Appointment) See a Hacked Dage 2 for Signa Ruse DATE						
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
Saenger Associates		1800 Post Oak Blvd., 6 Blvd. Place, Suite 450		Hou	ston, TX 77056	GP1000001081
		o Biva. Filado, Gaillo Foo				
Saenger Management, L.L.C.		1800 Post Oak Blvd., 6 Blvd. Place, Suite 450		Hou	ston, TX 77056	M05000004915
REINSTATEMENT 2 00					06-2010	
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.						
11. It do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I release the Division of Corporations from any liability of hon-compliance with Chapter 119, F.S. in the eyent 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 matutes.						
SIGNATURE ML 9/1/10						
Typed or Punted Name of General Partner Signing Form Allen J. Becker, manager of Saenger Management, L.L.C. Telephone Number 113 330 5660						

A 20503

<u>Saenger Theatre Partnership, Ltd.</u> Acceptance of Registered Agent Appointment

We, Capitol Corporate Services, Inc., being appointed the registered agent of the above-named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Dated: September 2, 2010

Gayle Windle, Assistant Secretary Capitol Corporate Services, Inc.

A20503

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

09-03-10

NAME:

SAENGER THEATRE PARTNERSHIP, LTD

TYPE OF FILING: REINSTATEMENT

COST:

\$5,052.50- check provided

RETURN: CERTIFIED COPY

ACCOLINT: FCA000000015

A<u>UTHORIZATION: ABBIE/PAUL</u> ĤODGI

JK