

APPLICATION FOR
REINSTATEMENT
FOR
LIMITED PARTNERSHIP



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 OCT 13 PM 3:26

DOCUMENT # A26481

1. Name of Limited Partnership
HEATHROW TOWN CENTER ASSOCIATES LIMITED

ML

DO NOT WRITE IN THIS SPACE.

2. Mailing Address 4350 LA JOLLA VILLAGE DRIVE		3. Principal Office Address SAME AS MAILING ADDRESS		4. Date Formed or Registered To Do Business in Florida MAY 25, 1988	
Suite, Apt. #, etc. SUITE 700		Suite, Apt. #, etc.		5. FEI Number 33-0302275	
City & State SAN DIEGO, CALIFORNIA		City & State		Applied For Not Applicable	
Zip 92122-1233	Country SAN DIEGO	Zip	Country	6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> <small>SM 75 - Additional Fee required for a Certificate of Status.</small>	
8a. Capital Contributions as Shown on Record 100		7. State or Country of Formation FLORIDA			

8b. Amount of Capital Contributions in FLORIDA to date 0		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 Corporation Service Company 1201 Hays Street Tallahassee, Florida 32301		10. If changed, new registered agent/office	
		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		Suite, Apt. #, etc.	
		City	Zip Code FL

10a. 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) *Deborah D. Skipper* **Deborah D. Skipper as its agent** DATE 10/13/99

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. Registration Document Number
HAHN HEATHROW, INC.	SUITE 700 4350 LA JOLLA VILLAGE DR.	SAN DIEGO, CA	P19326
REMARKS - 1000.00 AR 105.00 AR SUPP 177.50 COS 8.75 <hr/> \$1,291.25		900003013649-4 REINSTATEMENT 1998-1999 <i>(ML) (OS)</i>	

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)(k), 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 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 *Holli G. Salazar* DATE 10/12/99
 Typed or Printed Name of General Partner Signing Form **Holli G. Salazar, V.P. & Secretary** Telephone Number **(858)546-1001**
HAHN HEATHROW, INC.

CR2E039 (12/98)

A26481



ACCOUNT NO. : 072100000032
 REFERENCE : 410032 4807937
 AUTHORIZATION : *Patricia Pizut*
 COST LIMIT : \$ 1291.00

ORDER DATE : October 12, 1999
 ORDER TIME : 12:19 PM
 ORDER NO. : 410032-005
 CUSTOMER NO: 4807937
 CUSTOMER: Mr. Mark Bryant
 Trizechahn Centers Inc.
 Suite 700
 4350 La Jolla Village Drive
 San Diego, CA 92122-1233

DOMESTIC FILINGS

NAME: HEATHROW TOWN CENTER ASSOCIATES LIMITED

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Tamara Odom

EXAMINER'S INITIALS

B/K 10/11/99

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 99 OCT 13 PM 3:26

RECEIVED
 99 OCT 13 PM 12:48
 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA