

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 MAR 10 AM 9:04

**LIMITED
PARTNERSHIP
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # A29911

1. Name of Limited Partnership

P C HATHAWAY ASSOCIATES, L.P.

CR2E039 (8/05)

2. Principal Office Address
1775 WOODSTOCK ROAD

3. Mailing Office Address
1775 Woodstock Road

4. Date Formed or Registered
To Do Business in Florida 04/10/1990

Suite, Apt. #, etc.
Suite 150

Suite, Apt. #, etc.
Suite 150

5. FEI Number
58-1910237

Applied For
Not Applicable

City & State
Roswell, Georgia

City & State
Roswell, Georgia

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status

Zip
30075

Country
USA

Zip
30075

Country
USA

7a. Capital Contributions as shown on Record:
2,000.00

7b. Amount of Capital Contributions in FLORIDA to date:
2,000.00

8. Name and Address of Current Registered Agent

Name
William J. Terry

Street Address (P.O. Box Number is Not Acceptable)
101 E Kennedy Blvd.

Suite, Apt. #, Etc.
Suite 2560

City
Tampa

State
FL

Zip Code
33602

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 due.
- 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) _____ 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
Star Succession Corporation	1775 Woodstock Road Suite 150	Roswell, GA 30075	P28863
<p>400068542244 03/23/06--01050--020 **7000.00 REINSTATEMENT 2000-06</p>			

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 _____

DATE 2/28/2006

Typed or Printed Name of General Partner Signing Form

Howard E. Bowen

Telephone Number 770-650-3939