PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.		
PARTNERSHIP REINSTATEMENT 2000	FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	FILED W. 01 JAN 10 AM 9: 22 1/17
DOCUMENT # A93- 1. Name of Limited Partnership	-866	SECRETARY OF STATE TAUEAHASSEE FLORIDA
Garrett Holdings, LTD.		1000038899315 -03/21/0101037001 ***1026.25 ***1026.25
2. Principal Office Address	3. Mailing Office Address	4. Date Formed or Registered
20 Celestial Way	20 Celestial Way	To Do Business in Florida 7/28/93
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. FEI Number Applied For 65 – 0428085 Not Applicable
#116	#116 ⁻	
City & State	City & State	CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status
Juno Beach, Florida	Juno Beach, Florida	7a. Capital Contributions as shown on Record:
33408 USA	33408 USA	458,250.
		7b. Amount of Capital Contributions in FLORIDA to date:
8. Name and Address of 0	Current Registered Agent	458, 250,
Jo'Anne G. Harrison		FEES: 1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered
Street Address (P.O. Box Number is Not Acceptable)		in 7b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office.
V20':Celestial_Way Suite, Apt. #, Etc.		Supplemental Fee(s): \$88.75 for <u>each year due</u> this office, beginning with 1992 calendar year.
		Penalty Fee(s): \$500 penalty fee for <u>each year report form is delinquent.</u> Note: If the amount entered in 7b is greater than amount entered in
City	State Zip Code	7a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.
Juno-Beach-		
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
Jo'Ann Garrett Harrison 20 Celestial Way #116 Juno Beach, FL 33408 N/A		
D'Anne-Garrett-Salame-	2072- Derby-Road-	irmingham, MI48009 N/A
Estate of Dorothy M Gar:		
	20 Celestial Way #116 J	uno Beach, FL 33408 N/A
Cottes: Jo'Anne Garrett Harris D'Ann Garrett Salame	son in City	VSTATEMENT 2000
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 filling 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 () Can y DATE 12/12/00		

Typed or Printed Name of General Partner Signing Form Jo' Ann G. Harrison

(00/6) 6503

Telephone Number <u>561-626-4735</u>