APPLICATION FOR REINSTATEMENT **FOR** LIMITED PARTNERSHIP



FLORIDA DEPARTMENT OF STATE

Katherine Harris

 Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # A93000000 884

1. Name of Limited Partnership
The King Family himited Partnership

FILED

99 JUL -6 AM 9: 55

Score lary of State TALLAHASSEE, FLORDA

			DO NOT WRIT	DO NOT WRITE IN THIS SPACE		
2. Mailing Address 9050 E. Kanyon Dr	3. Principal Office Address 3412 S.E. Clul	house Pa	4. Date Formed or Registered To Do Business in Florida	00/30/	11993	
Suite, Apt #, etc	Suite, Apt. #. etc		5. FEI Number		Applied For	
City & State /UCSON, AZ	City & State Stuppt FL		58-2062 58		Not Applicable	
Zip Country	Zip Country		6. CERTIFICATE OF STATUS DESII	CERTIFICATE OF STATUS DESIRED 1 Solution at Fee required for a Certificate of Status		
85710-4446 U.S.	34997 U	34447 U.S.		7. State or Country of Formation FLORIDA		
8a. Capital Contributions as Shown on Record  800, 500  8b. Amount of Capital Contributions in FLORIDA to date  705, 000	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 <u>each year due</u> this office.  2.) Supplemental Fee(s): \$88.75 for <u>each year due</u> this office, beginning with 1992 calendar year.  3.) Penalty Fee(s): \$500 penalty fee for <u>each year teport form is delinquent.</u> 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 R	egistered Agent		10. If changed, new registered agent/office			
Robert J. HAAS 3412 S.E. Clubhouse PL Stunnt, FL 34997		Name  Street Address (P.O. Box Number Is Not Acceptable)  3412  Suite. Apt W. etc  City Stunnt  FL 34497				
agent. I am familiar with, and accept the obligations of signature.  SIGNATURE (Registered Agent Accepting Appointment)				R BUSINES	S ENTITY	
11. Names of General Partner(s)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)		City, State and Zip Code	11a. Doc	Registration ument Number	
THE TR WHILE MADE TAL DESIGNET	±	·····		6991879		
THE T.B. KING MARITAL DEDUCTION	9058 E. Kenyo	NDR TO	uesur, AZ 85710	0///01/	10,20	
KING, BURTROM A.	9050 E. Kenyo		300002: -07/13 ***10: eson, Az 85710 STATEMENT	93008 799-0106 35.00 ***	0004	
Note: General partners MAY NOT b	e changed on this form	an amendn	nent must be filed to char	nge a gener	al 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 Trelease the Division of Corporations from any liability of non-compliance with Section 119 07(3)(k) in the event that the information supplied is decimed 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 partne ship, receiver or trustee empowered to execute this partner of the limited partner of the same legal effects.

Typed or Printed Name of General Partner Signing Form \_

SIGNATURE (

Bustram A. King, M&P