

FILE ON OR BEFORE APRIL 8, 1998 TO AVOID  
REVOCAATION AND \$500 PENALTY FEE

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

98 APR 23 AM 9: 53

LIMITED PARTNERSHIP  
ANNUAL REPORT  
1997

FLORIDA DEPARTMENT OF STATE  
TAMPA, FL 33604  
Secretary of State  
DIVISION OF CORPORATIONS

**A94000001187**

1. Name of Limited Partnership

1a. DOCUMENT #  
**A94000001187**

**MARINA VILLAGE BAYWAY, LTD.**

Mailing Address  
**% FOUNTAINS BAYWAY, INC.  
3802 S. WEST SHORE BOULEVARD  
TAMPA FL 33611**

Principal Office Address  
**% FOUNTAINS BAYWAY, INC.  
3802 S. WEST SHORE BOULEVARD  
TAMPA FL 33611**

2. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

2a. Principal Office Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Date Formed or Registered  
**08/31/1994**

3a. Date of Last Report  
**12/24/1996**

4. State or Country of Formation  
**FL**

5a. Capital Contributions as Shown on record.  
**\$550,000.00**

5b. Amount of Capital Contributions in FLORIDA to date:  
**1,000**

6. FEI Number  
**59-3265420**  
☐ Applied For  
☐ Not Applicable

7. Certificate of Status Desired  
☐ **\$8.75** Additional Fee Required

8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent

**MILLER, MARK E  
3802 S. WEST SHORE BOULEVARD  
TAMPA FL 33611**

10. If changed, new Registered Agent/Office

Name  
**500002512365--9**

Street Address (P.O. Box Number is Not Acceptable)  
**05/06/98--01010--001**

Suite, Apt. #, etc.  
**\*\*\*\*641.25 \*\*\*\*641.25**

City  
**FL**

Zip Code

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) \_\_\_\_\_ DATE \_\_\_\_\_

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

11. Name(s) of General Partner(s)	11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)	11b. City, State & Zip Code	11c. Registration/Document Number
<b>FOUNTAINS BAYWAY, INC.</b>	<b>3802 WESTSHORE BLVD.</b>	<b>TAMPA FL 33611</b>	<b>P93000041095</b>

**REINSTATEMENT** **98**  
**AK 4-28**

**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 Mark E. Miller as Vice President of Fountains Bayway, Inc. DATE 2/2/98  
Mark E. Miller Fountains Bayway, Inc. (813) 839-7500

CR2E003 (12/97)