APPLICATION FOR REINSTATEMENT	Katherin	TIMENT OF STATE	175¢		
FOR Secretary of State LIMITED PARTNERSHIP DIVISION OF CORPORATIONS			St. Callet	and the state of t	
DOCUMENT # A9400001756 1. Name of Limited Partnership			99 JUL 23 MIT	1: 29	
GATTON FAM	AILY LIMITED PARTNE	ERSHIP	DO NOT WRITE	. IN THIS SPACE	
2. Mailing Address	3. Principal Office Address		4. Date Formed or Registered To Do Business in Florida 12/10/07		
6916 W. University Avenue Soite Apr # etc	6916 W. University Avenue Suite Apt #.etc		5. FEI Number	2/19/94 Applied For	
City & State	Cry & State Gainesville, FL Zip Country			X Not Applicable	
Gainesville, FL Zp Country			6. CERTIFICATE OF STATUS DESIR	ED X \$8.75 Additional Fee required for a Certificate of Status	
32607	32607		7. State or Country of Formation		
8a. Capital Contributions as Shown on Record	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.) Penatty 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.				
\$1,100.00 8b. Amount of Capital Contributions in FLORIDA to date					
\$1,100.00					
9. Name and Address of Current Registered Agent Name			10. If changed new registered a	agent/office	
Prentice-Hall Corporation	Ronald A. Carpenter Street Address (P.O. Box Number Is Not Acceptable)				
1201 Hays Street, Suite 10 Tallahassee, FL 32301	5608 NW Suite, Apt #, etc	5608 NW 43rd 100 2345840 - 3 Suite, Apt *, etc -07/30/9901042008			
<u> </u>		City	City ***3215.00 ***3215.00		
Gainesville, FL 32653 10a. Pursuant to the provisions of sections 620 1051 and 620 1994 forida 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 as registered office or registered agent, or both in the State of Florida Guerr Change was authorized by its general partner(s). Thereby accept the appointment of registere agent. From Aprilliar with and accept the obligations of 192, Florida Stateres. SIGNATURE (Registered Agent recepting Appointment).					
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 P	Partner	H THIS OFFICE. City, State and Zip Code	119 Registration	
	(Do NOT Use Pust Office Box I	Numbers)		Document Number	
Gatton Family Corporation 6916 W. University Ave. Gainesville, FL 32607 P94000083644					
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 lifting is volunitarily 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 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					

Typed or Printed Name of General Partner Signing Form _ Charles Gatton