

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301 (904) 224-8870
 Mailing Address: Post Office Box 10345, Tallahassee, FL 32302
 TOLL FREE No. 1-800-342-8062
 FAX (904) 222-1222

NAME _____
 FIRM _____
 ADDRESS _____

PHONE () _____

Service: Top Priority _____ Regular _____
 One Day Service Two Day Service

To us via _____ Return via _____

Matter No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

*\$ 87.50 - F.I.P.
 CM*

REQUEST TAKEN CONFIRMED APPROVED
 DATE _____
 TIME _____ CK No. _____
 BY *Ju* _____

WALK-IN Will Pick Up *3:30* *1:00*

RE: *Sembler E.D.P. Partnership #1, Ltd*

95 MAR 30 PM 1:58 SECRETARY OF STATE TALLAHASSEE, FLORIDA FILED	C.C. FEE. <i>87.50</i> DISBURSED Capital Express™ Art. of Inc. File Corp. Record Search ☒ Ltd. Partnership File Foreign Corp. File ☒ Cert. Copy(s) ☒ Photo Copy Art. of Amend. File Dissolution/Withdrawal C U S- Fictitious Name File Name Reservation Annual Report/Reinstatement Reg. Agent Service Document Filing Corporate Kit Vehicle Search Driving Record Document Retrieval UCC 1 or 3 File UCC 11 Search UCC 11 Retrieval File No.'s, _____ Copies <i>0000001449400</i> Courier Service <i>-04/06/95--01046--010</i> Shipping/Handling <i>*****87.50 *****07.50</i> Phone () _____ Top Priority _____ Express Mail Prep. _____ FAX () _____ pgs. _____
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SUBTOTALS	
FEE.....	\$ _____
DISBURSED.....	\$ _____
SURCHARGE.....	\$ _____
TAX on corporate supplies.....	\$ _____
SUBTOTAL.....	\$ _____
PREPAID.....	\$ _____
BALANCE DUE.....	\$ _____
	\$ _____

Please remit invoice number with payment
 TERMS: NET 10 DAYS FROM INVOICE DATE
 1 1/2% per month on Past Due Amounts
 Past 30 Days, 18% per Annum

THANK YOU
 from
 Your Capital Connection

SEMBLER E.D.P. PARTNERSHIP #1, LTD.,
a Florida limited partnership

FILED
MAR 30 PM 4:58
95
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of the Partnership is SEMBLER E.D.P. PARTNERSHIP #1, LTD.
2. The address of the office of the Partnership is 5858 Central Avenue, St. Petersburg, Florida 33707.
3. The name and address of the agent for service of process on the Partnership is SEMBLER CENTERS, INC., 5858 Central Avenue, St. Petersburg, Florida 33707.
4. The name and business address of the General Partner is as follows:

Sembler Centers, Inc.5858 Central Avenue
St. Petersburg, Florida 33707

v38264
5. The mailing address of the Partnership is 5858 Central Avenue, St. Petersburg, Florida 33707.
6. The latest date upon which the Partnership shall dissolve is March 1, 2095.

The execution of this Certificate and Affidavit by the undersigned General Partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

IN WITNESS WHEREOF, this Certificate and Affidavit of Limited Partnership has been executed by the General Partner of SEMBLER E.D.P. PARTNERSHIP #1, LTD., this 1st day of March, 1995.

GENERAL PARTNER:

SEMBLER CENTERS, INC., a
Florida corporation

By:

Craig L. Sier
President

Attest:

Brent Sembler
Secretary

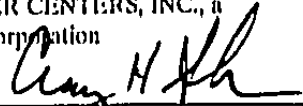
ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as registered agent for SEMBLER E.D.P. PARTNERSHIP #1, LTD., a Florida limited partnership (the "Partnership"), in the foregoing Certificate and Affidavit of Limited Partnership, I, on behalf of the Partnership, hereby agree to accept service of process for said Partnership and to comply with any and all statutes relative to the complete and proper performance of the duties of registered agent.

REGISTERED AGENT:

SEMBLER CENTERS, INC., a
Florida corporation

By:


Craig H. Shier
President

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

95 MAR 30 PM 1:58

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AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned constituting all of the general partners of SEMBLER E.D.P. PARTNERSHIP #1, LTD., a Florida limited partnership, certify as follows:

The amount of capital contributions to date of the limited partners is \$1,000.00.

The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$1,000.00.

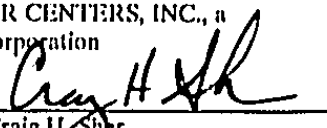
This 1st day of March, 1995

FURTHER AFFIANT SAYETH NOT.

Under the penalties of perjury, I declare that I have read the foregoing and that the facts alleged are true to the best of my knowledge and belief.

SEMBLER CENTERS, INC., a
Florida corporation

By:


Craig H. Sher
President

FILED
95 MAR 30 PM 1:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILE ON OR BEFORE DECEMBER 31, 1995 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Tawana Matthews
Secretary of State
DIVISION OF CORPORATIONS

FILED
96 JAN -2 PM 3:21
RECEIVED
JAN 11 1996

1. Name of Limited Partnership

1a. DOCUMENT #
A95000000504

SEMBLER E.D.P. PARTNERSHIP #1, LTD.

DO NOT WRITE IN THIS SPACE

2. How Mailing Address, if Applicable

State, Apt. #, etc.

PO BOX 138787

-01/12/96--01005--026

City, State & Zip

***191.25 ***191.25

2a. How Principal Office Address, if Applicable

State, Apt. #, etc.

City, State & Zip

Mailing Address

5050 CENTRAL AVENUE
ST. PETERSBURG FL 33707

Principal Office Address

5050 CENTRAL AVENUE
ST. PETERSBURG FL 33707

If above addresses are incorrect in any way, file through the secretary of state and enter correct address in Block 2 and/or 2a.

3. Date Formed or Registered to Do Business in
FLORIDA
03/30/1995

3a. Date of Last Report

4. State or Country of Formation

FL

5a. Capital Contributions as Shown
on Record
\$1,000.00

5b. Amount of Capital Contributions in
FLORIDA to date
\$1,000.00

6. Filing Status

✓

Applied for
Not Applicable

7. CERTIFICATE OF STATUS REQUIRED

\$0.75 Additional Fee required
for a Certificate of Status

8. FEES: 1) Filing Fee. Computed at a rate of \$7 per \$1,000 on amount entered in 5b or 5a if 5b blank, with a minimum filing fee of \$52.50 and a maximum of \$437.50.
2) Supplemental Fee. \$138.75 (pursuant to section 607.113, F.S.)
THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$138.75) AND NO MORE THAN \$570.25 (\$437.50 + \$138.75).
Note: If the amount entered in 5b is greater than amount entered in 5a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE

9. Name and Address of Current Registered Agent

SEMBLER CENTERS, INC.
5850 CENTRAL AVENUE
ST. PETERSBURG FL 33707

10. If changed, how Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

State, Apt. #, etc.

City

FL

Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.102, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits the 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 620.102, Florida Statutes.

DATE

SIGNATURE (Registered Agent Accepting Appointment)

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY

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. Registry/ Document Number
SEMBLER CENTERS, INC.	5850 CENTRAL AVENUE	ST. PETERSBURG FL 337	V38264

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 accurately furnished and does not qualify for the exemption state in law (see 110.071(3)(a), Florida Statutes). I release the Division of Corporations from any liability of non-compliance with section 607.113(3)(a) 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 effect 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 609, Florida Statutes.

SIGNATURE

SEMBLER CENTERS, INC.

Craig H. Sher, President

(DATE)

12/23/95

Telephone Number

(813) 384-6000

Typed or Printed Name of General Partner Signer

0003412

CR2E003 (6-95)