120 Hays Street
Tallahassee, FL 32301
(904) 222-8171
800-342-8086

A95000000563

CSC networks
PRENTICE HALL
LEGAL & FINANCIAL SERVICES

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -7 PM 3:22

ACCOUNT NO. : 072100000032

REFERENCE : 573935 6221A

AUTHORIZATION :

COST LIMIT : 9 PPD

ORDER DATE : April 7, 1995

ORDER TIME : 11:05 AM

ORDER NO. : 573935

CUSTOMER NO: 6221A

CUSTOMER: Ms. Becca Kennedy
ABEL BAND RUSSELL COLLIER
PITCHFORD & GORDON, CHARTERED
Barnett Bank Center, 8-10th Fl
240 South Pineapple Avenue
Sarasota, FL 34236-6737

700001454917
-04/12/95--01103--000
****227.50 ****227.50

DOMESTIC FILING

File 2nd

NAME: PINEAPPLE AVENUE ASSOCIATES, LTD.

____ ARTICLES OF INCORPORATION
XX ____ CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX ____ CERTIFIED COPY
____ PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sebrena Randolph

EXAMINER'S INITIALS: DK

C. TAX	
FILING	140 00
R. AGENT FEE	35 00
S. COPY	52.50
TOTAL	227.50
N. CHECK	
BALANCE DUE	
REFUND	

4/7/95

CERTIFICATE OF LIMITED PARTNERSHIP OF

PINEAPPLE AVENUE ASSOCIATES, LTD.

a Florida limited partnership

The undersigned general partner desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Law as set forth in Chapter 620 of the Florida Statutes, does hereby state the following:

1. The name of the Partnership is Pineapple Avenue Associates, Ltd.

2. The address of the office of the Partnership is:

   455 Longboat Key Road #PH-4
   Longboat Key, Florida 34228

3. The name and address of the agent for service of process on the Partnership is as follow:

   Mark S. Kauffman
   455 Longboat Key Road #PH-4
   Longboat Key, Florida 34228

4. The names and business addresses of the general partners are as follows:

   Pineapple Avenue Associates, Inc.
   455 Longboat Key Road #PH-4
   Longboat Key, Florida 34228

5. The mailing address of the Partnership is:

   455 Longboat Key Road #PH-4
   Longboat Key, Florida 34228

6. The latest date upon which the Partnership shall dissolve is December 31, 2044, unless the term of the Partnership is further extended by a Majority in Interest of the Partners as defined in this Agreement.

7. The effective date of this Certificate of Limited Partnership shall be the effective date of the filing of the certificate of limited partnership with the Department of State.

The execution of this certificate by the undersigned general partners constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

IN WITNESS WHEREOF, this Certificate of Limited Partnership has been executed by Mark S. Kauffman, as President of Pineapple Avenue Associates, Inc., the general partner of Pineapple Avenue Associates, Ltd, a Florida Limited Partnership, this 7th day of April, 1995.

WITNESSES:

Pineapple Avenue Associates, Inc.

By: _____
Mark S. Kauffman, President

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -7 PM 3:22

(DSB/BDM/bjk\C:wp50\ltd\pineapple.clp)

ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named to accept service of process for PINEAPPLE AVENUE ASSOCIATES, LTD., at the place designated in the foregoing Certificate of Limited Partnership, I, Mark S. Kauffman, hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I accept the duties and obligations of Section 620.192, Florida Statutes.

Date: 4/4/95

Mark S. Kauffman,
Registered Agent

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -7 PM 3:22

(DSB\BDM\bjk\c:\wp50\ltd\pineapple.ARA)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -7 PM 3:22

STATE OF FLORIDA
COUNTY OF SARASOTA

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned Notary Public, personally appeared Mark S. Kauffman, the President of Pineapple Avenue Associates, Inc., the general partner of Pineapple Avenue Associates, Ltd., a Florida limited partnership, hereinafter referred to as "Partnership," who, upon being duly sworn, certified as follows:

1. The amount of the capital contributions of the limited partners of the Partnership is $ 19,600.00.

2. The amount of additional capital contributions of the limited partners of the Partnership anticipated is $ -0-.

Under 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.

WITNESSES:

Pineapple Avenue Associates, Inc.,
a Florida corporation

By: Mark S. Kauffman
Mark S. Kauffman,
as its President

"GENERAL PARTNER"

The foregoing instrument was acknowledged before me, this 4th day of April, 1995, by Mark S. Kauffman, President of Pineapple Avenue Associates, Inc., a Florida corporation, who is personally known to me ~~or who has produced~~ N/A ~~as identification~~ and who ~~did~~ (did not) take an oath.

Notary Public
Print Name REBECCA J. KENNEDY

My Commission Expires:

OFFICIAL NOTARY SEAL
REBECCA J KENNEDY
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC208922
MY COMMISSION EXP. JULY 24,1996

(DSB\BDM\bjk\c:\wp50\ltd\pineapple.Afd)

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
Sandra Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 NOV -1 AM 11:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership

1a. DOCUMENT # A95000000563

PINEAPPLE AVENUE ASSOCIATES, LTD. 96 AR

CM

Mailing Address
455 LONGBOAT KEY ROAD, #PH-4
LONGBOAT KEY FL 34228

Principal Office Address
~~455 LONGBOAT KEY ROAD, #PH-4~~
~~LONGBOAT KEY FL 34228~~

2. New Mailing Address: 1290 North Palm Avenue
Suite, Apt. # etc.
City, State & Zip: Sarasota FL 34236

2n. New Principal Office Address: 1290 North Palm Ave.
Suite, Apt. # etc.
City, State & Zip: Sarasota FL 34236

If above addresses are incorrect in any way, line through the incorrect information and enter correct address in Block 2 and/or 2a

3. Date Formed or Registered to Do Business in FLORIDA: 04/07/1995

3a. Date of Last Report: N/A

4. State or Country of Formation: FL

5a. Capital Contributions as Shown on Record: $19,600.00

5b. Amount of Capital Contributions in FLORIDA to date:

6. FEI Number: 65-0580465

7. CERTIFICATE OF STATUS REQUIRED
Applied For
Not Applicable
$8.75 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 607.193 F.S.)
THE AMOUNT DUE SHALL BE NO LESS THAN $191.25 ($52.50 + $138.75) AND NO MORE THAN $576.25 ($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
KAUFMAN, MARK S
455 LONGBOAT KEY ROAD, #PH-4
LONGBOAT KEY FL 34228

10. If changed, new Registered Agent/Office
Name
Street Address (P.O. Box Number Is Not Acceptable)
*1170B795--40051--025
****275.35 ****275.35
Suite, Apt. # etc.
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

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
PINEAPPLE AVENUE ASSOCIATES,	455 LONGBOAT KEY ROAD	LONGBOAT KEY FL 34228	P95000027816

CR2E003 (6/95)

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)(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 use. 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 620, Florida Statutes.

SIGNATURE Mark Kaufman DATE

Typed or Printed Name of General Partner Signing Form: MARK KAUFFMAN

Telephone Number: 813-383-3220

0008342