

1204 HAYS STREET
TALLAHASSEE, FL 32304
904-222-9771
904-222-0393 FAX

800-342-8086



A95000001089

ACCOUNT NO. : 072100000032

REFERENCE : 643414 6794A

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE : July 18, 1995

ORDER TIME : 10:05 AM

ORDER NO. : 643414

CUSTOMER NO: 6794A

CUSTOMER: Heidi Lloyd, Legal Assistant
FISHER & SAULS, P.A.

City Center, Suite 701
100 Second Avenue South
St. Petersburg, FL 33721

G. TAX _____
FILING 1,750.00
R. AGENT FEE 35.00
G. COPY 8.75
TOTAL \$1,793.75
N. BANK _____

BALANCE DUE 700001542767
FILING 07/21/95--01005--004
***1785.00 ***1785.00

DOMESTIC FILING

XXXX

NAME: TIBBETTS FAMILY LIMITED
PARTNERSHIP.

ARTICLES OF INCORPORATION

XXXX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XXXXX PLAIN STAMPED COPY
XXXXX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sebrene Randolph

EXAMINER'S INITIALS: BH

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUL 18 AM 11:40

RECEIVED
95 JUL 18 AM 11:13
DIVISION OF CORPORATION

RUSH WILL WAIT

**CERTIFICATE OF LIMITED PARTNERSHIP OF
TIBBETTS FAMILY LIMITED PARTNERSHIP**

FILED STATE
DIVISION OF CORPORATIONS
95 JUL 18 AM 11:41

1. The name of the partnership is **TIBBETTS FAMILY LIMITED PARTNER
SHIP.**

2. The address of the partnership office is **3300 Fairfield Avenue South, St. Petersburg, Florida 33712.** The name and address of the agent for service of process is **Russel P. Brandes, 3300 Fairfield Avenue South, St. Petersburg, Florida 33712.** The mailing address and principal place of business of the partnership are one and the same.

3. The name and business address of each general partner is as follows:
Linton N. Tibbetts as Trustee for
Linton N. Tibbetts Amended **3300 Fairfield Ave. S.**
Declaration of Trust Dated **St. Petersburg, FL 33712**
the 17th day of December, 1990.

4. The latest date upon which the limited partnership is to dissolve, wind-up, and liquidate is **December 31, 2045.**

The Certificate of Limited Partnership of **TIBBETTS FAMILY LIMITED PARTNER-
SHIP** has been executed on the 17th day of July, 1995. By such execution, each general partner whose signature is set forth below hereby affirms, under the penalties of perjury, that the facts stated herein are true.

Linton N. Tibbetts Declaration of Trust
Dated the 17th day of December, 1990

By Linton N. Tibbetts
Linton N. Tibbetts, as Trustee

"GENERAL PARTNER"

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Russel P. Brandes
Russel P. Brandes, as Registered Agent

AFFIDAVIT OF CAPITAL CONTRIBUTIONS
(Affidavit)

STATE OF FLORIDA
COUNTY OF PINELLAS

BEFORE ME, the undersigned authority personally appeared all of the general partners of **TIBBETTS FAMILY LIMITED PARTNERSHIP**, a Florida limited partnership, hereinafter referred to as the "Partnership", who, upon being duly sworn, certified as follows:

1. The amount of capital contributions to the Partnership through the date below set forth made by the limited partners of the Partnership is \$730,000.00.

2. The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$730,000.00.

FURTHER AFFIANT SAYETH NOT.

Under penalties of perjury, I declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true to the best of my knowledge and belief.

Linton N. Tibbets
Linton N. Tibbets, as Trustee of the Linton
N. Tibbets Declaration of Trust
Dated the 17th day of December, 1990

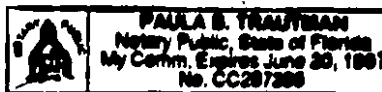
"GENERAL PARTNER"

The foregoing instrument was acknowledged before me this 17th day of July, 1995 by Linton N. Tibbets, who is personally known to me or who produced a _____ State Driver's License as Identification, as Trustee of the Linton N. Tibbets Declaration of Trust Dated the 17th day of December, 1990.

Paula B. Trautman
Signature

Paula B. Trautman
Printed Name
Notary Public-State of Florida
(Seal)

58930.1



FILE ON OR BEFORE DECEMBER 31, 1996 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra Matham
Secretary of State
DIVISION OF CORPORATIONS

FILED

OCT -5 1995

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership

1a. DOCUMENT #
A95000001089

TIBBETTS FAMILY LIMITED PARTNERSHIP

Mailing Address

3800 FAIRFIELD AVENUE SOUTH
ST. PETERSBURG FL 33712

Principal Office Address

3800 FAIRFIELD AVENUE SOUTH
ST. PETERSBURG FL 33712

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
07/14/1985

3a. Date of Last Report
N/A

4. State or Country of Formation
FL

2. New Mailing Address, If Applicable

Suite, Apt. #, etc.

City, State & Zip

2a. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City, State & Zip

600001605856
-10/11/95--01036--006
*****576.25 ***576.25**

5a. Capital Contributions as Shown
on Record
\$730,000.00

5b. Amount of Capital Contributions in
FLORIDA to date
730,000

6. FEI Number
59-3327895

Applied For
Not Applicable

7. CERTIFICATE OF STATUS REQUIRED

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

BRANDES, RUSSEL P
3800 FAIRFIELD AVENUE SOUTH
ST. PETERSBURG FL 33712

10. If changed, new Registered Agent/Office

Name

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

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)

TIBBETTS, LINTON N TRUSTEE

11a. Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

3800 FAIRFIELD AVENUE

11b. City, State & Zip Code

ST. PETERSBURG FL 337

11c. Registration/
Document Number

AR - \$437.50
SF - \$138.75

10-9-95a

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

Linton N. Tibbets General Partner

DATE

9-25-95

Typed or Printed Name of General Partner Signing Form

Linton N. Tibbets

Telephone Number

813-327-4503