1000 20 11 10						
APPLICATION FOR REINSTATEMENT -FOR -LIMITED PARTNERSHIP DOCUMENT # A9500001097			SE OIVIS	SECRETARY OF STATE DIVISION OF CORPORATIONS 99 JUL - 1 PM 4: 10 DO NOT WRITE IN THIS SPACE		
GULLANE, LT						
2. Mailing Address 8611 Gullane Ct. 3. Principal Office Address Same			4. Date Formed of To Do Busines	4. Date Formed or Registered To Do Business in Florida 7 /18 / 95		
Suite, Apt #, etc. Suite. Apt #, etc.			5. FEI Number Applied For			
City & State	& State City & State		65-06	65-0633322 Not Applicable		
Palm Beach Garde Zip Country	Palm Beach Gardens F Country Zip Cour		6. CERTIFICATE OF	6. CERTIFICATE OF STATUS DESIRED 58 75 Additional Fee required for a Certificate of Status		
33412		ļ	7. State or Countr	ry of Formation F1.		
\$3,000.00 8b. Amount of Capital Contributions in FLORIDA to date	\$40 2.) Sup 3.) Per Note: If the amo	37.50, for <u>each year due</u> this c pplemental Fee(a): \$88.75 for nalty Fee(s): \$500 penalty fee	of \$7 per \$1,000 on amount entered in ffice such year due this office, beginning wit for each year report form is delinquent an amount entered in 8a, a supplement	h 1992 calendar year.		
9. Name and Address of Current Registered Agent			10. If changed	10. If changed, new registered agent/office		
August Cassella Sr. 8611 Gullane Ct. Palm Beach Gardens, Fl. 33412			Name Street Address (P.O. Box Number is Not Acceptable)			
			Suite, Apt #, etc			
		City		F	Zip Code	
10a. Pursuant to the provisions of sections 620 for the purpose of changing its registered agent. I am familiar with, and accept the or SIGNATURE (Registered Agent Accepting Appointr A GENERAL PARTNER T	office or registered agent, or both, biligations of section 620 192. Florid ment)	in the State of Florida Such of a Statutes	nange was authorized by its general p	DATE	the appointment of registered	
		ERED AND ACT of Each General Partner	IVE WITH THIS OFF		Registration	
11. Names of General Partner(s)		Post Office Box Numbers)	City. State and Zip	Code 118	E-ocument Number	
August J. Cas	ssella 8611 G	ullane Ct.	Palm Beach Ga Fl. 33412	rdens		
		g :	700	0002924 -07/07/99- ****141,29	47478 -01033001 5 ****141.25	

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 turnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes T 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 hap other same legal effects as if made under oath. I further certify that Yam a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620. Florida Statutes.

SIGNATURE ___

August J.

Cassella Telep

Telephone Number _.

ne -28-99



MARY L. KOLDRICK

CERTIFIED PUBLIC ACCOUNTANT AND CONSULTANT

THEALHAMBRA
725 NORTH AIA • SUITE E205
JUPITER, FLORIDA 33477
TEL. (561) 575-0856
FAX (561) 575-9891

June 14, 1999

e-mail: mkoldrick@aol.com

Fl. Dept. of State Division of Corporations P O Box 6327 Tallahassee, Fl. 32314

Gentlemen:

Last week I spoke with Gretchen Harvey concerning the Certificate of Revocation of Gullane, Ltd.

The check that Mr. August Cassella sent to you on February 12, 1999, in the amount of \$141.25 has never cleared. Accordingly, I am enclosing another check in the same amount for the 1999 Annual Report for Gullane, Ltd. Also enclosed is the 1999 Annual Report.

Very truly yours,

Mery J. Koldrick

cc Mr. August Cassella Sr.

MEMBER AMERICAN INSTITUTE OF CPAS MEMBER FLORIDA INSTITUTE

MEMBER FLORIDA INSTITUT OF CPAS