

1201 HAYS STREET
TALLAHASSEE, FL 32301
904-222-9871

800-342-8086



A95000001140

FILED
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
95 JUL 26 PM 12:13

ACCOUNT NO. : 072100000032

REFERENCE : 648563 6517A

AUTHORIZATION :

COST LIMIT : \$ PREPAID

ORDER DATE : July 26, 1995

ORDER TIME : 10:10 AM

ORDER NO. : 648563

CUSTOMER NO: 6517A

CUSTOMER: Mary Fendle, Legal Assistant
DEAN HEAD EGERTON BLOODWORTH
CAPOUANO & BOZARTH, P.A.
P. O. Box 2346

Orlando, FL 32802-2346

500001550905
-08/01/95--01084--001
****148.75 ****148.75

7/26/95
FILING 52.50
AGENT FEE 35.00
COPY 52.50
TOTAL 140.00
V. BANK
BALANCE DUE
PAID

DOMESTIC FILING

NAME: LIVE OAKS CENTER, LTD.

XXX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XXX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Karen B. Rozer

EXAMINER'S INITIALS: *MR*

7/26/95
MR

CERTIFICATE OF LIMITED PARTNERSHIP OF
LIVE OAKS CENTER, LTD.

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DIVISION OF CORPORATIONS
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The undersigned General Partner desiring to form a limited partnership (the "Partnership") pursuant to the Florida Revised Uniformed Limited Partnership Act, Sections 620.101-620.186, Florida Statutes, hereby states the following:

1. The name of the Partnership is "LIVE OAKS CENTER, LTD."
2. The address of the office of the Partnership, referred to in Section 620.105, Florida Statutes, is 505 Maitland Avenue, Suite 200, Altamonte Springs, Florida, 32701.
3. The name and address of the agent for service of process on the Partnership shall be Anthony J. Bruno at 505 Maitland Avenue, Suite 200, Altamonte Springs, Florida, 32701.
4. The name and business address of the General Partner are:

<u>Name</u>	<u>Address</u>
The Ensign Company	505 Maitland Ave, Suite 200 Altamonte Springs, Fl. 32701

5. The mailing address for the Partnership is 505 Maitland Avenue, Suite 200, Altamonte Springs, Florida, 32701.

6. The latest date upon which the Partnership shall dissolve is December 31, 2030.

7. A conveyance or encumbrance of real property or any interest therein held in the name of the Partnership, any other instrument affecting title to real property in which the Partnership has an interest shall be executed in the Partnership name by the General Partner. Any person dealing with the Partnership or its property shall be entitled to rely fully upon any deed, mortgage, bill of sale, contract, lease, sublease, note or other written instrument signed by the General Partner in the name of and/or on behalf of the Partnership.

This Certificate of Limited Partnership was executed by the sole General Partner this 25th day of July, 1995.

GENERAL PARTNER:

THE ENSIGN COMPANY

By: 

Anthony J. Bruno, President

Registered Agent Designation

Having been named as registered agent for the above-named Partnership, at the place designated in the foregoing Certificate of Limited Partnership, I hereby accept such designation and agree to act in such capacity, and I further agree to comply with the provisions of all statutes relevant to the proper and complete performance of my duties as registered agent. I am familiar with, and accept the duties and obligations of, Section 620.192 of the Florida Statutes.


Anthony J. Bruno

Date: July 25, 1995

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUL 26 PM 12:13

STATE OF FLORIDA
COUNTY OF SEMINOLE

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned, personally appeared Anthony J. Bruno, President of THE ENSIGN COMPANY, the sole general partner of LIVE OAKS CENTER, LTD., a Florida limited partnership (hereinafter referred to as the "Partnership"), of Seminole County, Florida, who upon being duly sworn, certified as follows:

1. The amount of the capital contributions to the Partnership made by the limited partners is \$100.00.
2. The amount of additional capital contributions anticipated to be contributed by the limited partners is \$0.

FURTHER AFFIANT SAYETH NOT.

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.

GENERAL PARTNER:

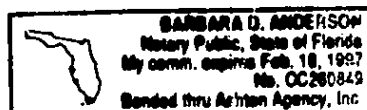
THE ENSIGN COMPANY

Date: July 25, 1995

By: [Signature]
Anthony J. Bruno, President

The foregoing instrument was acknowledged before me this 25 day of July, 1995, by Anthony J. Bruno, as President of The Ensign Company, a Florida corporation, on behalf of the corporation. Said person did not take an oath and (check one) ☒ is personally known to me, ☐ produced a driver's license (issued by a state of the United States within the last five (5) years) as identification, or ☐ produced other identification, to wit:

Barbara D. Anderson
Print Name: Barbara D. Anderson
Notary Public, State of Florida
Commission No.: C.C. 260849
My Commission Expires: Feb. 18, 1997



FILE ON OR BEFORE DECEMBER 31, 1995 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$300 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996



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

FILED

96 JAN 24 PM 5:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership

1a. DOCUMENT #
A95000001140

LIVE OAKS CENTER, LTD.

96-AR
Cus

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

Mailing Address

505 HATLAND AVENUE, SUITE 200
ALTAMONTE SPRINGS FL 32701

Principal Office Address

505 HATLAND AVENUE, SUITE 200
ALTAMONTE SPRINGS FL 32701

CM

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
07/26/1985

3a. Date of Last Report

4. State or Country of Formation
FL

5a. Capital Contributions as Shown
on Record
\$100.00

5b. Amount of Capital Contributions in
FLORIDA to date

6. FEI Number
57-3340838

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

10. If changed, new Registered Agent/Office

BRUNO, ANTHONY J
505 HATLAND AVENUE, SUITE 200
ALTAMONTE SPRINGS FL 32701

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)

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

11b. City, State & Zip Code

11c. Registration/
Document Number

THE ENSIGN COMPANY

505 HATLAND AVENUE,

ALTAMONTE SPRINGS FL

FD001

900001698539
-01/26/96--01001--007
****200.00 ****200.00

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 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

DATE 1-22-96

Typed or Printed Name of General Partner Signing Form ANTHONY J. BRUNO, PRES

Telephone Number 407 657 1622

THE ENSIGN COMPANY

CR2E003 (6/95)