APPLICATION FOR REINSTATEMENT FOR LIMITED PARTNERSHIP

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
97 JUN -6 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

1. Name of Limited Partnership: A95000001428

Franklin S. Davis Limited Partnership

2. Mailing Address: 15780 Glenisle Way
Suite, Apt. #, etc.:
City & State: Fort Meyers, FL
Zip: 33912 County: Lee

3. Principal Office Address: Same
Suite, Apt. #, etc.:
City & State:
Zip: County:

4. Date Formed or Registered To Do Business in Florida: 9-25-95

5. FEI Number: 65-0608763
Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED [X]

7. State or Country of Formation: Florida

8a. Original Contributions as Shown at Above: $3,000,000.00

8b. Amount of Original Contributions in Florida: N/A

FEES: 1) Filing Fee: Computed at a rate of $7 per $1,000 on amount entered in 8a, with a minimum filing fee of $52.50 and a maximum of $437.50, for each year due this office.
2) Supplemental Fee: $103.75 for each year due this office, beginning with 1996 and later years.
3) Penalty Fee: $500 penalty fee for each year dated late is delinquent.
Note: If the amount entered in 8b is greater than amount entered in 8a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.

9. Name and Address of Current Registered Agent:

Franklin S. Davis
15780 Glenisle Way
Fort Meyers, FL 33912

10. If changing, 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 620.1021 and 620.105, 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 the general partner(s). I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 620.105, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Names of General Partners	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	City, State and Zip Code	11a. Registration Document Number
Franklin S. Davis	15780 Glenisle Way	Fort Meyers, Fl 339 2	N/A

900002208749--9
-06/11/97--01068--004
*****437.50 *****437.50

REINSTATEMENT

900002208749--9
-06/11/97--01068--003
*****612.50 *****612.50

500.00 437.50 103.75 8.75

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 true and correct. I am aware that any false information submitted in a document to the Department of State pursuant to Chapter 620, Florida Statutes, constitutes a misdemeanor of the first degree, punishable as provided in Section 775.082 or 775.083, Florida Statutes. I further certify that I am a General Partner of the limited partnership, member or manager authorized to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE Franklin S Davis DATE 5/19/97

Typed or Printed Name of General Partner Signing Form: Franklin S. Davis, General Ptr. Telephone Number: