

A95000001630

ROBINSON, BRADSHAW & HINSON, P.A.

ATTORNEYS AT LAW

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1900 INDEPENDENCE CENTER
101 NORTH TAYLOR STREET
CHARLOTTE, NORTH CAROLINA 28246
TELEPHONE (704) 377 2536
FAX (704) 378-4000

SOUTH CAROLINA OFFICE
THE GUARDIAN BUILDING
ONE LAW PLACE - SUITE 600
P.O. DRAWER 12070
ROCK HILL, S.C. 29731
TELEPHONE (803) 325-2900
FAX (803) 325-2929

October 25, 1995

VIA FEDERAL EXPRESS

000001621840
-10/27/95--01001--029
*****87.50 *****87.50

Florida Department of State
409 East Gaines Street
The Capital Room 2002
Post Office Box 6327
Tallahassee, Florida 32301-8047

Attention: Limited Partnership Division

Re: Faison-Waterford Lakes Village Limited Partnership

Dear Sir/Madam:

Please find enclosed herein the following documents for filing with your office:

1. Two (2) originals of the Certificate of Limited Partnership;
2. Two (2) originals of the Affidavit of Capital Contributions of the Limited Partners of Faison-Waterford Lakes Village Limited Partnership; and
3. Our firm's check in the amount of \$87.50 to cover the filing fees.

| | |
|----------------|---|
| Name | 10/30/95 |
| Availability | 9:00 |
| Document | Filing information in the enclosed, self-addressed, stamped envelope. |
| Examiner | Please contact the undersigned should you have any questions. |
| Updated | |
| Under | |
| Vendor | |
| Advised | |
| W. P. Verifier | WIG/wm |

WIG/wm
Enclosures

Sincerely,

ROBINSON, BRADSHAW & HINSON, P.A.

William T. Graves

William T. Graves

FILED
1995 OCT 26 AM 11:00
TALLAHASSEE, FLORIDA

A95000001630

TC
\$100.00

CERTIFICATE OF LIMITED PARTNERSHIP

The undersigned general partner hereby files this Certificate of Limited Partnership of **Faison-Waterford Lakes Village Limited Partnership** (the "Partnership") with the Florida Department of State in order to form a limited partnership pursuant to Section 620.108 of the Florida Revised Limited Partnership Act (1986) (the "Act").

1. Name. The name of the Partnership is Faison-Waterford Lakes Village Limited Partnership.

2. Business Address. The business address of the Partnership in the State of Florida and the address at which the Partnership shall keep the records regarding the name, addresses and capital contributions of its limited partners is as follows:

Suite 500
225 E. Robinson Street
Orlando, Florida 32801
Attention: Mr. John M. Joyce

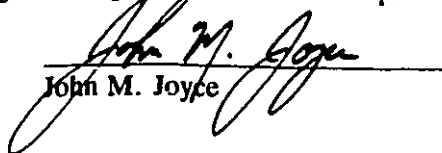
3. General Partner. The name and the business address of the general partner of the limited partnership is:

Faison Capital Development, Inc. F9200000016
121 West Trade Street
1900 Interstate Tower
Charlotte, North Carolina 28202-5399
Attention: Mr. Robert W. Liptak

4. Registered Agent and Registered Office. The name and address of the registered agent for service of process are:

Mr. John M. Joyce
Suite 500
225 E. Robinson Street
Orlando, Florida 32801

The registered agent has signed in the space below to evidence his acceptance of his appointment as registered agent for the Partnership.


John M. Joyce

Date: 10/16, 1995

5. Partnership Mailing Address. The mailing address for the limited partnership is:

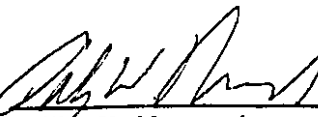
121 West Trade Street
1900 Interstate Tower
Charlotte, North Carolina 28202-5399

6. Latest Dissolution Date. The latest date upon which the limited partnership is to dissolve is December 31, 2021.

Signed this 23 day of October, 1995.

FAISON CAPITAL DEVELOPMENT, INC.,
General Partner

By:



Philip W. Norwood,
President

FILED
1995 OCT 26 AM 11:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

THE FOREGOING instrument was acknowledged and sworn to before me, this 23rd day of October, 1995, by Philip W. Norwood, President of **FAISON CAPITAL DEVELOPMENT, INC.**, General Partner of Faison-Waterford Lakes Village Limited Partnership, a Florida limited partnership.

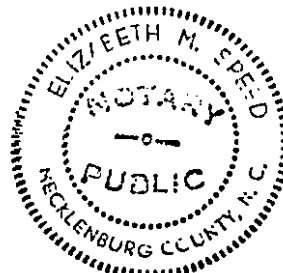


Notary Public

State of North Carolina at Large

My Commission Expires: 5-2-2000

[NOTARIAL SEAL]



**AFFIDAVIT OF CAPITAL CONTRIBUTIONS
OF THE LIMITED PARTNERS OF FAISON-WATERFORD LAKES VILLAGE
LIMITED PARTNERSHIP, A FLORIDA LIMITED PARTNERSHIP**

BEFORE ME the undersigned personally appeared Philip W. Norwood, President of Faison Capital Development, Inc., a North Carolina corporation, general partner of Faison-Waterford Lakes Village Limited Partnership, a Florida limited partnership (hereinafter referred to as the "Partnership"), who certifies as follows:

1. The amount of capital contributions of the limited partners of the Partnership is One Hundred Dollars (\$100.00).

2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is One Hundred Dollars (\$100.00).

This 23 day of October, 1995.

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 and correct.

FAISON CAPITAL DEVELOPMENT, INC., a
North Carolina corporation, General Partner of
Faison-Waterford Lakes Village Limited Partnership

By: _____

Philip W. Norwood
President

FILED
1995 OCT 26 AM 11:05
CLERK OF DISTRICT COURT
FLORIDA

STATE OF NORTH CAROLINA
COUNTY OF MECKLENBURG

October 23, 1995

BEFORE ME, the undersigned officer, a Notary Public authorized to administer oaths and to take acknowledgements in and for the State and County set forth above, personally appeared Philip W. Norwood, President of Faison Capital Development, Inc., General Partner of Faison-Waterford Lakes Village Limited Partnership, known to me and known by me to be the person who executed the foregoing Affidavit of Capital Contributions, and he acknowledged to me and before me that he executed this Affidavit as the President of the General Partner of Faison-Waterford Lakes Village Limited Partnership.

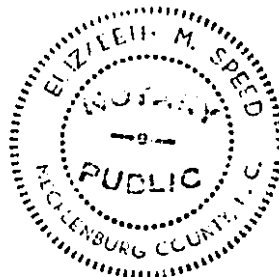
IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this 23rd day of October, 1995.


Notary Public

State of North Carolina at Large

My Commission Expires: 5-2-2000

[NOTARIAL SEAL]



FILED
1995 OCT 26 AM 11:05
S.E. TALLAMASSEE, FLORIDA

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 DEC 19 AM 9:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership

1a. DOCUMENT #

A95 000001630

Faison-Waterford
Lakes Village Limited Partnership

Mailing Address

Principal Office Address

121 W. Trade St., Suite 1900
Attn: Legal Department
Charlotte, NC 28202

121 W. Trade Street
Suite 1900
Attn: Legal Department
Charlotte, NC 28202

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 Form filed or Registered to Do Business in
FLORIDA

10-26-95

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
\$100.00

6. FEI Number

56 1943626

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 607.103, 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

John Joyce
Suite 60
225 E. Robinson Street
Orlando, FL 32801

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
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

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

Faison Capital
Development, Inc.

121 W. Trade Street
Suite 1900

Charlotte, NC 28202

F92000000164

200001672412
-12/28/95--01011--022
****191.25 ****191.25

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 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

Elizabeth M. Speed

DATE 12-15-95

Telephone Number 704/331-2500

Typed or Printed Name of General Partner Signing Form

CR2E003 (6/95)