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LIM TED PARTNERS LIP DIVISION OF COLUMN RATIONS						FILED				
DOCLIMENT #						98 MAY 18 PH 4: 09				
1. Name of Limited Partnership						SECRETARY OF STATE TALLAHASSEE, FLORIDA				
Micha Land, Ltd.						,				
2. Maiing Address Research Blvd 1000 3. Principal Office Address /o Joanna Price 13809 Research Blvd 1000						4. Date Forme		E IN THIS SPACE		
Suite, Apl. #, etc.	Suite 1000			To Do Business in Florida 1.1-6-95						
Suite 1000					74-2757169 Applied For Not Applicable					
City & State Austin, Texas		Austin, Texas 78750				6. S8 /5 Additional Fee transfer				
78750			Zip Country			CERTIFICATE OF STATUS DESIRED for a Gertificate of Status				
8a. Capital Contributions	as Shown	EEEC				7. State or Country of Formation				
3,600,000	FEES:1.) Filing Fee(s): Computed at a rate of \$7 per \$1,00 \$437.50, for <u>each</u> year <u>due</u> this office. 2.) Supplemental Fee(s): \$587.5 for <u>each</u> year <u>due</u> to a supplemental Fee(s): \$500 penalty fee for <u>each</u> year re  Note: If the amount entered in Bb is greater than amount entered propriets filing fee.					_	2.50 and a maximum of			
8b. Amount of Capital Contributions in FLORIDA to date.										
9. 1	gistered Agent			10. If changed, new registered agent/office						
Pohl, Brown and Assoc. of Florida, Inc.										
7FAA - 9 - 9					ess (P.O. Bo	s (P.O. Box Number is Not Acceptable)				
rc. myers, rL 33919				Sulte, Apt. #, etc05/21/3801007005						
			City	city ***1026.25 ************************************						
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 state of the purpose of changing its registered under the laws of the State of Florida.									ubmits this statement	
for the purpose of changing its registered office or registered agent, or byth, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registagent. I say familiar with, and accept the obligations of section 620 199. Filtrida Statutes.									omenent or registered	
SIGNATURE (Registed Agent Accepting Apportment)							DATE			
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.									SS ENTITY	
11. Names of Genera	Partner(s)	Address of Each General Pari (Do NOT Use Post Office Box Nur				City, State and Zi	p Code	11a. Do	Registration ocument Number	
Pohl, Will	iam B	13809 Research Bl					<b>505-</b>			
Brown, Gar	rown, Gary F. 13809 Research		ch Bl	lvd. Aus		in, Texa: in, Texa:	s 78750 s 78750			
House, Cha Morelisse,		3535 Enland Empire		e Onto		orio, CA S	91764		ļ	
-				siva.	ŗt.	Myers, F	1 33919			
0 . 10	down & Cited									
Limen					engen ka engelyen b		M	1		
5-1	REINSTATEMENT 8									
amendment filed 5-18-98							_		ブイ	
						(	125	r ( )		
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 emporered to execute this required by chapter 620, Florida stabilies.										

Typed or Printed Name of General Partner Signing Form

325.6677