

A95000001692

PLEASE PRINT OR TYPE CLEARLY AND COMPLETELY. BE CAREFUL WHEN COMPLETING THIS FORM.

LIMITED  
PARTNERSHIP  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

01 NOV 30 PM 5:07

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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-12/07/01--01031--027  
\*\*\*1035.00 \*\*\*1035.00

DOCUMENT # A95000001692

1. Name of Limited Partnership

Micha Land, Ltd.

2. Principal Office Address

1520 Royal Palm Square Blvd.

Suite, Apt. #, etc.

Suite 360

City & State

Fort Myers, Florida 33919

Zip

33919

Country

USA

3. Mailing Office Address

1520 Royal Palm Square Blvd.

Suite, Apt. #, etc.

Suite 360

City & State

Fort Myers, Florida 33919

Zip

33919

Country

USA

4. Date Formed or Registered  
To Do Business in Florida

11/6/95

5. FEI Number

74-2757169

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required  
for a Certificate of Status

7a. Capital Contributions as shown on Record:

\$5,000,000

7b. Amount of Capital Contributions in FLORIDA to date:

FEES:

1. Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 7b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office.
  2. Supplemental Fee(s): \$88.75 for each year due this office, beginning with 1992 calendar year.
  3. Penalty Fee(s): \$500 penalty fee for each year report form is delinquent.
- Note: If the amount entered in 7b is greater than amount entered in 7a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.

8. Name and Address of Current Registered Agent

Name

Pohl, Brown & Associates of Florida, Inc.

Street Address (P.O. Box Number is Not Acceptable)

1520 Royal Palm Square Boulevard

Suite, Apt. #, Etc.

Suite 360

City

Fort Myers

State

FL

Zip Code

33919

9. 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)

*E.C. Miller*

DATE 11/13/02

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

10. Name(s) of General Partner(s)

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

City, State and Zip Code

10a. Registration  
Document Number

William B. Pohl  
Gary F. Brown  
Charles House  
Henk Morelisse, Jr.  
Eric C. Miller

13809 Research Blvd.  
13809 Research Blvd.  
3535 Enland Empire  
800 Laurel Oak Dr.  
1520-360 Royal Palm  
Square Blvd.

Austin, Texas 78750  
Austin, Texas 78750  
Ontario, CA 91764  
Naples, FL 34108  
Fort Myers, FL 33919

REINSTATEMENT 2001

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

11. 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)(i), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(i) 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

*E.C. Miller*

DATE 11/13/01

Typed or Printed Name of General Partner Signing Form

ERIC C. MILLER

Telephone Number

(641) 275-8067

CR2E038 (9/01)