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11/08/95

FLORIDA DIVISION OF CORPORATIONS

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((H95000012592))

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TO: DIVISION OF CORPORATIONS

FROM: HENDERSON, FRANKLIN, STARNES & HOLT,
PO BOX 280

DEPARTMENT OF STATE

STATE OF FLORIDA

409 EAST GAINES STREET

TALLAHASSEE, FL 32399

FORT MYERS FL 33902-0280

FAX: (904) 922-4000

CONTACT: BARB B ISLE

PHONE: (941) 334-4121

FAX: (941) 332-4494

((H95000012592))

DOCUMENT TYPE: FLORIDA LIMITED PARTNERSHIP

NAME: LATELL CROIX APARTMENTS, LTD.

FAX AUDIT NUMBER: H95000012592

CURRENT STATUS: REQUESTED

DATE REQUESTED: 11/08/1995

TIME REQUESTED: 15:30:46

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CERTIFICATE OF STATUS: 1

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** ENTER 'M' FOR MENU. **

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CERTIFICATE OF LIMITED PARTNERSHIP OF STATE
TALLAHASSEE, FLORIDA

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

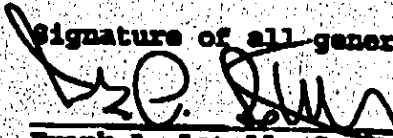
- Under penalties of perjury we declare that we have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Prepared by: Guy E. Whitesman, Esq.
Florida Bar No.: 334189
1715 Monroe Street
Fort Myers, FL 33901
(941) 334-4121

FAX AUDIT NO. : H95000012592

FAX AUDIT NO.: E95000012592

Signature of all general partners:


Frank A. Latell, General Partner

Croix Apartments of Lee County, Inc.,
General Partner


By: Frank A. Latell, President

FAX AUDIT NO.: E95000012592

FAX AUDIT NO.: H95000012592

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS
FOR FLORIDA LIMITED PARTNERSHIP**

The undersigned constituting all of the general partners of
LATELL CROIX APARTMENTS, LTD., a Florida Limited Partnership,
certify:

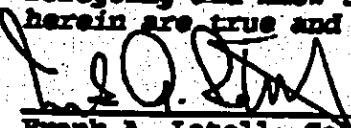
The amount of capital contributions to date of the limited
partners is \$667,636.20.

The total amount contributed and anticipated to be contributed by
the limited partners at this time totals \$667,636.20.

Signed this 8th day of November, 1995.

FURTHER AFFIANT SAYETH NOT.

Under the penalties of perjury we declare that we have read the
foregoing and know the contents thereof and that the facts stated
herein are true and correct.



Frank A. Latell, General Partner

Croix Apartments of Lee County, Inc.,
General Partner

By: 

Frank A. Latell, President

FAX AUDIT NO.: H95000012592

APPLICATION FOR
REINSTATEMENT
FOR
LIMITED PARTNERSHIP

DOCUMENT # A95000001707

1. Name of Limited Partnership

LATELL CROIX APARTMENTS, LTD.

96 MAY 22 AM 11:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Mailing Address
954 CLARELLEN

Suite Apt # etc

City & State
FORT MYERS, FL 33919

Zip Country
33919 LEE

3. Principal Office Address
954 CLARELLEN

Suite Apt # etc

City & State
FORT MYERS, FL 33919

Zip Country
33919 LEE

4. Date Formed or Registered
To Do Business in Florida 11/08/1995

5. FEI Number
65-0617924

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

7. State or Country of Formation FLORIDA

8a. Capital Contributions as Shown
on Record
\$667,636.20

8b. 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 8b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office.
2.) Supplemental Fee(s): \$138.75 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 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

10. If changed, new registered agent/office

LATELL, FRANK A.
954 CLARELLEN
FORT MYERS, FL 33919

Name

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

Peppertree Apts. Manager,
3207 Broadway, #77

Fort Myers, FL 33901

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. Names of General Partner(s)

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

City, State and Zip Code

11a. Registration
Document Number

LATELL, FRANK A.
CROIX APARTMENTS OF LEE CO.

Peppertree Apts. Manager,
3207 Broadway, #77
Fort Myers, FL 33901

FORT MYERS, FL 33901

FORT MYERS, FL 33901

P9500002067

700001844277
-05/30/96--01040--008
***1085.00 ***1085.00

REINSTATEMENT

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

FRANK A. LATELL

DATE

Telephone Number

Typed or Printed Name of General Partner Signing Form

CR2E039 (4/95)