A95000001073

LEXIS DOCUMENT SERVICES
Requestor's Name

TALLAHASSEE, FL
Address

City/State/Zip Phone #

000001659300
-12/12/95--01026--003
*****61.25 *****61.25

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. NHPAHP AFFORDABLE HOUSING II LIMITED PARTNERSHIP
(Corporation Name) (Document #)
2. (Corporation Name) (Document #)
3. (Corporation Name) (Document #)
4. (Corporation Name) (Document #)

☐ Walk in ☐ Pick up time _____ ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☒ Certificate of Status

	NEW FILINGS
	Profit
	NonProfit
	Limited Liability
	Domestication
	Other

	AMENDMENTS
	Amendment
	Resignation of R.A., Officer/ Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

	OTHER FILINGS
	Annual Report
	Fictitious Name
	Name Reservation

	REGISTRATION/ QUALIFICATION
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

C. TAX CUS 8.75
FILING [redacted]
R. AGENT FEE _____
C. COPY 52.50
TOTAL 61.25
R. BANK _____
BALANCE DUE _____
REFUND _____

CR2E031(1/95)

Examiner's Initials	BH

148.75

FCA 00000005

A95000001873

P. O. Box 2969

Address

Springfield IL 62708

City/State/Zip Phone #

000001654620

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. NHPAHP Affordable Housing II Limited Partnership
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 DEC -6 PM 4:14

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	NEW FILINGS
	Profit
	NonProfit
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	Annual Report
	Fictitious Name
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	REGISTRATION/ QUALIFICATION
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

RECEIVED
95 DEC -6 AM 11:57
DIVISION OF CORPORATION

12/6/95

CR2E031(1/95)

Examiner's Initials	BN

CERTIFICATE OF LIMITED PARTNERSHIP
OF

1. HUMANA Affordable Housing II Limited Partnership
(Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")

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2. 1675 Palm Beach Lakes Boulevard, The Forum, Suite 1002, West Palm Beach, FL 33401
(Business address of Limited Partnership)

3. Lexis Document Services Inc.
(Name of Registered Agent for Service of Process)

4. 3953 W.W. KELLEY ROAD, TALLAHASSEE, FL 32311
(Florida street address for Registered Agent)

5. Cynthia L. Woodyard
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process)

6. 1675 Palm Beach Lakes Boulevard, The Forum, Suite 1002, West Palm Beach, FL 33401
(Mailing Address of the Limited Partnership)

7. The latest date upon which the Limited Partnership is to be dissolved is December 31, 2045.

8. Name of general partner(s):

Name of general partner(s):	Specific address:
Berkeley Federal Bank & Trust FSB	1675 Palm Beach Lakes Boulevard, The Forum Suite 1002, West Palm Beach, FL 33401

Signed this 5th *day of* December, *19* 95.

Signature of all general partners:

Berkeley Federal Bank & Trust FSB
General Partner

By: Mary L. Meyer
General Partner VICE PRESIDENT

General Partner

General Partner

General Partner

General Partner

General Partner

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

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DIVISION OF CORPORATIONS
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The undersigned constituting all of the general partners of

NHPAHP Affordable Housing II Limited Partnership, *a Florida Limited Partnership, certify:*

The amount of capital contributions to date of the limited partners is $ -0-.

The total amount contributed and anticipated to be contributed by the limited partners at this time totals $ 100.00.

FURTHER AFFIANT SAYETH NOT.

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

Berkeley Federal Bank & Trust FSB
General Partner

By: [signature]
General Partner VICE PRESIDENT

General Partner

General Partner

General Partner

General Partner

General Partner

This 5th day of December, 19 95.

NHPAHP Affordable Housing II Limited Partnership

To Whom It May Concern:

The undersigned hereby represents that NHPAHP Affordable Housing II Limited Partnership, NHPAHP Development Limited Partnership and NHPAHP Development Corporare related entities.

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95 DEC -6 PM 4:14

NHPAHP DEVELOPMENT CORP.,
a Florida corporation

By: Gary L. Mayer
Gary L. Mayer, Vice President

JMH2093

FILE ON OR BEFORE APRIL 5, 1996 TO AVOID REVOCATION AND $500 PENALTY FEE

LIMITED PARTNERSHIP ANNUAL REPORT 1996

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

FILED
96 FEB 26 AM 10:01
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DO NOT WRITE IN THIS SPACE.

1a. DOCUMENT # A95000001873

1. Name of Limited Partnership

NHPAHP AFFORDABLE HOUSING II LIMITED PARTNERSHIP

2. New Mailing Address, If Applicable

Suite, Apt. #, etc.

City, State & Zip

2a. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City, State & Zip

Mailing Address
THE FORUM
1675 PALM BEACH LAKES BLVD., SUITE 1002
WEST PALM BEACH FL 33401

Principal Office Address
THE FORUM
1675 PALM BEACH LAKES BLVD., SUITE 1002
WEST PALM BEACH FL 33401

If above addresses are incorrect in any way, line through the incorrect information and enter correct address in Block 2 and/or 2a

500001727365
-02/26/96-00002-007
****191.25 ****191.25

3. Date Formed or Registered to Do Business in FLORIDA: 12/06/1995

3a. Date of Last Report

4. State or Country of Formation: FL

Applied For ☐ Not Applicable ☐

7. CERTIFICATE OF STATUS REQUIRED ☐

5a. Capital Contributions as Shown on Record: $100.00

5b. Amount of Capital Contributions in FLORIDA to date: $100.00

6. FEI Number: 65-0625675

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 607.193, 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

LEXIS DOCUMENT SERVICES INC.
3953 W.W. KELLEY ROAD
TALLAHASSEE FL 32301

10. If changed, new Registered Agent/Office

Name: JOHN R. ERBEY
Street Address (P.O. Box Number Is Not Acceptable): 1675 PALM BEACH LAKES BLVD.
Suite, Apt. #, etc.: SUITE 1002
City: WEST PALM BEACH FL Zip Code: 33401

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 2/20/96

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
BERKELEY FEDERAL BANK & TRUS	1675 PALM BEACH LAKES	WEST PALM BEACH FL 33	BERKELEY FEDERAL BANK & TRUST IS A FEDERALLY CHARTERED SAVINGS BANK INCORPORATED UNDER THE LAWS OF THE UNITED STATES OF AMERICA AND THEREFORE DOES NOT NEED TO BE REGISTERED AS A GENERAL PARTNER IN THE STATE OF FL

AR - $52.50
SF - $138.75

2/28/96 aw

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 Stephen C. Wilhoit DATE 2/20/96

STEPHEN C. WILHOIT, SR. VICE PRESIDENT
Typed or Printed Name of General Partner Signing Form

Telephone Number

CR2E002 (11/95)

0001002