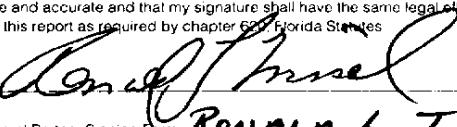


<p>APPLICATION FOR RE-STATEMENT FOR LIMITED PARTNERSHIP</p> <p>A960000000630</p> <p>FLORIDA DEPARTMENT OF STATE Suzanne M. Mathews Secretary of State DIVISION OF CORPORATION RE-STATEMENT</p>		<p>FILED 29 JUN 1996 PM 5:00 SECRETARY OF STATE FLORIDA DO NOT WRITE IN THIS SPACE</p>	
<p>DOCUMENT # A960000000630</p> <p>1. Name of Limited Partnership Aunt E's Limited Partnership</p>			
<p>2. Mailing Address 202 HEATHERPOINT DR Suite, Apt. #, etc</p>		<p>3. Principal Office Address 202 HEATHERPOINT DR Suite, Apt. #, etc</p>	
<p>City & State LAKELAND FL Zip 33809 Country POLK</p>		<p>City & State LAKELAND FL Zip 33809 Country POLK</p>	
<p>8a. Capital Contributions as Shown on Record 10.00</p>		<p>4. Date Formed or Registered To Do Business in Florida 02 APR 1996</p>	
<p>8b. Amount of Capital Contributions in FLORIDA to date</p>		<p>5. FEI Number 59-3370707</p>	
		<p>6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> 88.75 Additional Fee required for a Certificate of Status</p>	
		<p>7. State or Country of Formation FLORIDA</p>	
<p>9. Name and Address of Current Registered Agent RONALD L. TRISSEL 202 HEATHERPOINT DR LAKELAND FL 33809</p>		<p>10. If changed, new registered agent/office Name Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc City FL Zip Code</p>	
<p>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.</p>			
<p>SIGNATURE (Registered Agent Accepting Appointment) _____ DATE _____</p> <p>A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</p>			
<p>11. Names of General Partner(s) AUNT E's MANAGEMENT Co</p>		<p>Address of Each General Partner (Do NOT Use Post Office Box Numbers)</p>	
		<p>City, State and Zip Code 202 HEATHERPOINT DR LAKELAND FL 33809</p>	
		<p>11a. Registration Document Number 196-26630 59-3370714 600002902566--9 -06/11/99-01092--003 ***1291.25 ***1291.25 08-99 OK CWS</p>	
<p>Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.</p>			
<p>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.</p>			
<p>SIGNATURE </p>		<p>DATE 29 MAY 1996</p>	
<p>Typed or Printed Name of General Partner Signing Form RONALD L. TRISSEL Telephone Number 941-859-4535</p>			