

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870
 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302
 TOLL FREE: 1-800-441-0622
 (904) 227-2222

A960U000 2485

RE: CWB 4 Associates of
United Partnership

NAME _____
 FIRM _____
 ADDRESS _____

PHONE () _____

Service: Top Priority _____ Regular _____
 One Day Service Two Day Service

To us via _____ Return via _____

Matter No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

Name Availability	KWM	TAX FILING	1257
Document Examiner	KWM	AGENT FEE	35
Updater	KWM	COPY	1785
Updater Verifier	KWM	TOTAL	1785
Acknowledgement	KWM	N. BANK	
W. P. Verifier	KWM	BALANCE DUE	
		REFUND	

W96-27079
789 1023
returned ck
1785.00
OK
2/27/96

Capital Express™		DISBURSED
Art. of Inc. File		
Corp. Record Search		
<input checked="" type="checkbox"/> Ltd. Partnership File		
Foreign Corp. File		
() Cert. Copy(s)		
Art. of Amend. File	00002048807--1	
Dissolution/Withdrawal	-01/07/97--0111--012	
G U B.	***1750.00 ***1750.00	
Fictitious Name File		
Name Reservation		
Annual Report/Reinstatement		
Reg. Agent Service		
Document Filing		
Corporate Kit		
Vehicle Search		
Driving Record		
Document Retrieval		
UCC 1 or 3 File		
UCC 11 Search		
UCC 11 Retrieval		
File No.'s, Copies		
Courier Service		
Shipping/Handling	00002848807--1	
Phone ()	-01/07/97--0111--013	
Top Priority	***35.00 ***35.00	
Express Mail Prep.		
FAX ()	pgs.	

96 DEC 27 AM 9:07
 DIVISION OF CORPORATIONS
 SECRETARY OF STATE
 FILED

SUBTOTALS	
FEE	
DISBURSED	
SURCHARGE	
TAX on corporate supplies	
SUBTOTAL	
PREPAID	
BALANCE DUE	

96 DEC 27 AM 10:28
 DIVISION OF CORPORATIONS
 RECEIVED

REQUEST	TAKEN	CONFIRMED	APPROVED
DATE	12/27/96		
TIME	10:30		CK No. _____
BY	CD		

WALK-IN Will Pick Up _____

Please remit invoice number with payment
 TERMS: NET 10 DAYS FROM INVOICE DATE
 1 1/2% per month on Past Due Amounts
 Past 30 Days, 18% per Annum.

THANK YOU from Your Capital Connection



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State

December 27, 1996

CAPITAL CONNECTION, INC.

TALLAHASSEE, FL

SUBJECT: CWB & ASSOCIATES LIMITED PARTNERSHIP
 Ref. Number: W96000027079

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 96 DEC 27 AM 9:07

We have received your document for **CWB & ASSOCIATES LIMITED PARTNERSHIP** and your check(s) totaling \$1750.00. However, the enclosed document has not been filed and is being returned for the following correction(s):
LIMITED PARTNERSHIP CERTIFICATE/APPLICATION BASIC FEES

Filing fees \$52.50 minimum - \$1750 maximum
Registered Agent Designation \$35

The filing fee is based on the total amount contributed and anticipated to be contributed by the limited partners as shown in the affidavit at a rate of \$7 per \$1000. The filing fee for an Application to Register a Foreign Limited Partnership is based on the total amount contributed by the limited partners allocated for the purpose of transacting business in the State of Florida at a rate of \$7 per \$1000.

Certified Copy (15 pages or less, \$1 for each additional page after initial 15 pages)	\$52.50
Registered Agent/Office Change	\$35
Name Reservation (120 days nonrenewable)	\$35
Amendment (other than specified)	\$52.50
Affidavit Decreasing Contributions	\$52.50
Affidavit Increasing Contributions \$7 per \$1000 on increase only (\$52.50 minimum-\$1750 maximum)	
Certificate of Status or Fact	\$8.75
Cancellation	\$52.50
Resignation of Registered Agent	\$87.50
LP Annual Report \$7 per \$1000 of invested capital (\$52.50 minimum - \$437.50 maximum) plus Supplemental Fee of \$138.75	
Reinstatement	

RECEIVED
 96 DEC 30 AM 8:17
 DIVISION OF CORPORATIONS
 Corrected

**(\$500 for each year or part thereof the
partnership was revoked plus the delinquent
annual report fees)
The total amount due is \$1785.00.**

**Please return your document, along with a copy of this letter, within 60 days or
your filing will be considered abandoned.**

**If you have any questions concerning the filing of your document, please call
(904) 487-6967.**

**Kenny Manning
Corporate Specialist**

Letter Number: 196A00057498

**CERTIFICATE OF
LIMITED PARTNERSHIP OF
CWB & ASSOCIATES LIMITED PARTNERSHIP**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 DEC 27 AM 9:07

THIS CERTIFICATE OF LIMITED PARTNERSHIP OF CWB & ASSOCIATES LIMITED PARTNERSHIP, (the "Partnership") is being executed by the undersigned for the purpose of forming a Limited Partnership pursuant to the Florida Revised Uniform Limited Partnership Act.


- FIRST:** The name of the Limited Partnership is CWB & ASSOCIATES LIMITED PARTNERSHIP.
- SECOND:** The address of the office of the Partnership where the records will be maintained is 451 Central Park Drive, Largo, Florida 33771.
- THIRD:** The name and address of the agent for service of process is WILLIAM K. LOVELACE, 2310 West Bay Drive, Largo, Florida 33770.
- FOURTH:** The names, business address and mailing address of each General Partner is as follows:

Douglas K. Brane, as Trustee of the
Douglas K. Brane Partnership Trust
dated December 26, 1996
451 Central Park Drive
Largo, Florida 33771

- FIFTH:** The mailing address of the Limited Partnership is 451 Central Park Drive, Largo, Florida 33771. The mailing address and the principal place of business address are the same.
- SIXTH:** The latest date on which the Limited Partnership is to dissolve is fifty years from the date this Certificate is filed with the Secretary of State of Florida.

I, the undersigned General Partner, declare under penalties of perjury that I have examined the foregoing and it is true, correct and complete.

DATED this 26 day of December, 1996.


DOUGLAS K. BRANE, as Trustee of the
DOUGLAS K. BRANE PARTNERSHIP
TRUST

"General Partner"

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
96 DEC 27 AM 9:07

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

THE UNDERSIGNED, DOUGLAS K. BRANE, as Trustee of the DOUGLAS K. BRANE PARTNERSHIP TRUST, as General Partner of the CWB & ASSOCIATES LIMITED PARTNERSHIP, a Florida Limited Partnership being formed pursuant to Florida Statute § 620.108, does hereby, under penalty of perjury and to the best of the undersigned's knowledge and belief, declare as follows:

The amount of capital contribution of the Limited Partners and the amount anticipated to be contributed by the Limited Partners with respect to the Partnership is \$3,000,000.00.

FURTHER, Affiant sayeth not.

DATED this 26th day of December, 1996.


**DOUGLAS K. BRANE as Trustee of the
DOUGLAS K. BRANE PARTNERSHIP
TRUST**

STATE OF FLORIDA)
COUNTY OF PINELLAS)

BEFORE ME, the undersigned authority, personally appeared DOUGLAS K. BRANE, as Trustee of the DOUGLAS K. BRANE PARTNERSHIP TRUST, who expressed that he executed the foregoing Affidavit for the purposes therein expressed.

WITNESS my official hand and seal this 26th day of December, 1996.


Notary Public

My Commission Expires:



ACCEPTANCE OF REGISTERED AGENT

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
96 DEC 27 AM 9:07

Pursuant to Florida Statute 48.091 and this Certificate of Limited Partnership, the undersigned Registered Agent does hereby accept the duties as Registered Agent and designates as his location for service of process as:

WILLIAM K. LOVELACE, ESQUIRE
2310 West Bay Drive
Largo, Florida 33770

The undersigned shall serve as Registered Agent until otherwise removed or he shall resign pursuant to the laws of the State of Florida.

William K. Lovelace (SEAL)
WILLIAM K. LOVELACE, ESQUIRE