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FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

TO:	Registration S Division of C			
SUBJI	ECT: FOUNTA	INHEAD APARTMENT Florida Limited Partners	S-NATIONAL, LTD. hip or Limited Liability Lim	nited Partnership)
The en	closed Stateme	ent of Termination an	d fee(s) are submitted f	or filing.
Please	return all corre	espondence concernir	g this matter to:	
NATAI	LIE WEBB			
		(Contact Person)		
TARRA	AGON CORPORA	ATION		
		(Firm/Company)		9
3100 M	IONTICELLO AV	VE., STE. 200		
	· 1=-	(Address)		
DALLA	AS, TX 75205			
	((City, State and Zip Code)		
For fu	rther information	on concerning this ma	atter, please call:	
NATAI	LIE WEBB		at (214) 599-	
	(Name of Co	ontact Person)	(Area Code and Daytime Telephone Number)	
Enclos	sed is a check f	or the following amo	unt:	
¥\$52.5 10394	50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy	\$113.75 Filing Fee, Certified Copy, and Certificate of Status
STRE Regist Division Clifton 2661 I	ET ADDRES ration Section on of Corporat n Building Executive Cent assee, FL 323	ions er Circle	MAILING A Registration Division of C P. O. Box 63 Tallahassee,	Section Corporations 27

STATEMENT OF TERMINATION FOR

FOUNTAINHEAD APARTMENTS-NATIONAL, LTD.

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	1:01	STATE
Fountainhead, Inc., General Partner	MAY 21 PM	FILED AETARY OF N OF CORF
Kathryn Mansfield, Exec. VP & Secretary	07 M	OISIVIO SECH
Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:		
The limited partnership or limited liability limited partnership has completed wind its affairs and wishes to file a statement of termination.	ing up	
Pursuant to the provisions of section 620.1203, Florida Statutes, this Florida limite partnership or limited liability limited partnership, whose certificate was filed with Florida Department of State on June 13, 1997, hereby submit Statement of Termination.	the	