

FILE ON OCT 10 1999 TO AVOID REVOCATION AND \$200 PENALTY FEE

**A97000001336**

FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

99 SEP 17 AM 9:37

1. Name of Limited Partnership  
**RUTLAND ESTATES ASSOCIATES, LTD.**

1a. DOCUMENT #  
**A97000001336**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Mailing Address  
**4363 PARK STREET  
CLEARWATER FL 33756  
11350 66th ST N  
Suite 106 Largo FL 33773**

2. Mailing Address  
**11350 66th ST. N.  
#106  
LARGO, FL  
Zip 33773 Country USA**

Principal Office Address  
**1253 PARK STREET  
CLEARWATER FL 33756 Same**

2a. Principal Office Address  
**11350 66th ST. N.  
#106  
LARGO, FL  
Zip 33773 Country USA**

3. Date Formed or Registered  
**06/18/1997**

3a. Date of Last Report  
**05/14/1998**

4. State or Country of Formation  
**FL**

5a. Capital Contributions as Shown on record  
**\$800,000.00**

5b. Amount of Capital Contributions in FLORIDA to date

6. FEI Number  
**59-3454546** ☐ Applied For ☒ Not Applicable

7. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent  
**SWAIN, ROBERT E  
1055 BAY ESPLANADE  
CLEARWATER FL 34630**

10. If changed, new Registered Agent/Office  
Name  
Street Address (P.O. Box Number Is Not Acceptable)  
Suite, Apt. #, etc.  
City **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. 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
<b>RUTLAND ESTATES DEVELOPMENT CORPORATION</b>	<b>4363 PARK STREET 11350 66th ST. N Suite 106 Largo FL 33773</b>	<b>CLEARWATER FL 33756</b>	<b>P97000046405</b>
<b>REINSTATEMENT 99 TB</b> <b>200002985022--5</b> <b>-09/23/99--01057--001</b> <b>***1026.25 ***1026.25</b> <b>\$500.00 - Penalty</b> <b>\$526.25 - AR</b> <b>9-22-99</b>			

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 **Steve Pohlit** DATE **9/12/99**  
Typed or Printed Name of General Partner Signing Form **STEVE POHLIT** Daytime Telephone Number **727 545-3936**

CR2E003 (12/98)