

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1. Name of Limited Partnership

DOCUMENT # A9700001813



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INVESTORS AT KING'S LAKE,	LTD.			! 18870/1 1879 1874 1884 1884	[] [] []	80	
Mailing Address C/O PORTER, WRIGHT, MORRIS & ARTHUR 4501 TAMIAMI TRAIL NORTH, SUITE 400 NAPLES FL 34103	Principal Office Address C/O PORTER. WRIGHT, MORRIS & ARTHUR 4501 TAMIAMI TRAIL NORTH. SUITE 400 NAPLES FL 34103		3a. r	3. Date Formed or Registered 08/18/1997 3a. Date of Last Report 06/15/1998		5a. Capital Contributions as Shown on record. \$1,000.00 5b. Amount of Capital Contributions in FLORIDA	
2. Mailing Address 1097 Frank Whitman Rd Suite, Apt. #, etc.	2a. Principal Office Address 1097 Frank Whitman Rd Suite, Apt. #, etc.			4. State or Country of Formation FL 6. FEI Number		to date:	
City & State Naples Zip Country PL 344023	City & State Naples FL Zip Country 3+103		7. ce	59-3494516 rtificate of Status Desired ike check payable to Dept. of S	\$8.75 Additional Fee Required State (See reverse side for fee information)		
9. Name and Address of Current Registered Agent WILSON, GARY K C/O PORTER, WRIGHT, MORRIS & ARTHUR 4501 TAMIAMI TRAIL NORTH, SUITE 400 NAPLES FL 34103		Name John Enlow Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City Zip Code					
10a. Pursuant to the provisions of sections 620.1051 and 6 for the purpose of changing its registered office of registered agent. I am familiar with, and accept the obligations of SIGNATURE (Registered Agent Accepting Appointment). A GENERAL PARTNER THAT I	Istored agents of both, in the State of Floric Feed on 1970, 1922 Florida Pratures S A CORPORATION, I	d limited partners as Such chan	PARTNEF	piks general partner(s). I hereby DATE	y accept the a	ppointment of registered	
11. Name(s) of General Partner(s)	BE REGISTERED AN 11a. (Do NOT Use Post Office Box	n		HIS OFFICE.	11c.	Registration/ Document Number	
C R DEVELOPERS OF NAPLES, IN	P.O. BOX 413005 N/A			NAPLES FL 34103 7000025 -06/24/ ****14		P9700072958 B 1 4 9 9 7 1 793 01 107 00 1	
• • • • •				AL	JUN 2	1 1999	
Note: General partners MAY NOT	be changed on this form	; an am	endment mu	ust be filed to cha	nge a g	eneral partner.	
12. I do hereby certify that the information supplied with this from any liability of non-compliance with Section 119.07 is true and accurate and that day signature shall have the execute this reposition executed by comply 220. Elegical	 in the event that the information supposeme legal effects as if made under oath. 	lied is deemed	exempt from public a	access. I further certify that the	information in	dicated on this annual repo	
SIGNATURE				DATE _			
Tuned or Printed Name of General Partner Signing Form			Davein	ne Telenhone Number			

karey hensley cpa pa

Park North Suite 1 5117 Castello Drive, Suite 1 Naples, Florida 34103 941.434.8683 FAX 434.7793 email: kfhcpa@aol.com

June 3, 1999

Florida Department of State Registration Section Division of Corporations P O Box 6327 Tallahassee FL 32314-6327

RE: Investors of Kings Lake Ltd.

ID#: 59-3494516

Dear Sirs:

We are enclosing 1999 Annual Report and check in the amount of \$141.25. We are requesting your consideration in waiving penalty and interest as the report was sent to the attorney's office and just received by Investors at Kings Lake Ltd. today.

Please feel free to call if you have further questions.

Thank you.

Sincerely,

Karey Hensley