

APPLICATION FOR
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 APR 30 PM 12:45

DO NOT WRITE IN THIS SPACE.

LIMITED PARTNERSHIP

DOCUMENT # A 97000001844

1. Name of Limited Partnership

OLDE NAPLES LIMITED

2. Mailing Address

P.O. BOX 2008

Suite, Apt. #, etc.

City & State

NAPLES, FL

Zip

34106-2008

Country

USA

3. Principal Office Address

1957 W. CROWN POINT BLVD

Suite, Apt. #, etc.

City & State

NAPLES, FL

Zip

34112

Country

USA

4. Date Formed or Registered
To Do Business in Florida

5. FEI Number

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐\$6.75 Additional Fee required
for a Certificate of Status

7. State or Country of Formation

8a. Capital Contributions as Shown
on Record:

49,500

8b. Amount of Capital Contributions in
FLORIDA to date:

49,500

FEES: 1.)

Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 8b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office.

2.) Supplemental Fee(s): \$68.75 for each year due this office, beginning with 1992 calendar year.

3.) Penalty Fee(s): \$500 penalty fee for each year report form is delinquent.

Note: If the amount entered in 8b is greater than amount entered in 8a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.

9. Name and Address of Current Registered Agent

JOHN D. HUMPHREVILLE
4601 TAMiami TRAIL N., STE 300
NAPLES, FL 34103-3060

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. Names of General Partner(s)

Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

City, State and Zip Code

11a. Registration
Document NumberLUXURY HOMES
ENTERPRISES, INC.

1957 W CROWN POINT BLVD

NAPLES, FL 34112

P97000063746

200002513892--4
-05/06/98--01100--013
****435.25 ****435.25**Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.**

12. I 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

DATE

Typed or Printed Name of General Partner Signing Form

Telephone Number

CR2E039 (12/97)

②

HAYES & GALATI, P.A.
Certified Public Accountants

790 Harbour Drive, Suite 2B
Naples, Florida 34103-4461
Telephone (941) 263-5010
Facsimile (941) 263-3272

Roxane Kronon Galati, CPA
Stephanie A. Miller, CPA

April 24, 1998

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

Re: Olde Naples Limited
A97000001844

Dear Sirs:

Our client, Olde Naples Limited, received a Certificate of Revocation dated April 15, 1998 from your office. Since the partnership was formed, the general partner relocated. As such, our client did not receive either the 1998 Annual Report or a notice of pending revocation.

Enclosed please find a completed copy of the Application for Reinstatement and a check for \$ 435.25 to cover the 1998 Annual Report Fee. A representative of your office indicates that the penalty fee of \$500 would be waived in this instance.

Thank you for your cooperation in this matter.

Sincerely,

HAYES & GALATI, P A