LIMITED
PARTNERSHIP
REINSTATEMENT

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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

Secretary of State

DIVISION OF CORPORATIONS

FILED SECRETARY OF STATE IDIVISION OF CORPORATIONS

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DOCUMENT#	A97000002448
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1. Name of Limited Partnership

Kinsler Family Limited Partnership

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2. Principal Office Address 1023 Red Oak Circle Suite, Apt. #, etc.		3. Mailing Office Address 1023 Red Oak Circle Suite, Apt. #, etc.		4. Date Formed or Registered To Do Business in Florida 11-10'-97	
				5. FEI Number Appl 59-3476433 Not a	
City & State Brandon	FL	Gity & State Brandon, FL		CERTIFICATE OF STATUS DESIRED [P]	5 Additional Fee require or a Certificate of Status
Zip 33511-6269	Country US A	_+	intry US A	7a. Capital Contributions as shown on Record \$ [18,700:00] 7b. Amount of Capital Contributions in FLORI	
	8. Name and Address	of Current Registered Agent		\$118,700.00	
	Roger F. Number is Not Acceptable Oak Circle	3)		1.) Filing Fee(s): Computed at a rate of \$7 per \$1 in 7b, with a minimum filing fee of \$52.50 and for each year due this office. 2.) Supplemental Fee(s): \$88.75 for each year due	a maximum of \$437.50,
Suite, Apt. #, Etc.				with 1992 calendar year. 3.) Penalty Fee(s): \$500 penalty fee for each year	
Brandon		FL 33	Zip Code 511-6269	 Note: If the amount entered in 7b is greater the 7a, a supplemental affidavit must be submitted and appropriate filing fee. 	
0 5 55			10.00		1 2 1 1 1

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)

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A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. Address of Each General Partner Address of Each General Partner

10. Name(s) of General Partner(s)	(Do NOT Use Post Office Box Numbers)	City, State and Zip Code	Document Number
Kinsler, Roger F. Kinsler, Cathalene S.	1023 Red Oak Circle 1023 Red Oak Circle	Brandon. FL 33511-6269 Brandon. FL 33511-6269	A9700000 2 448 A9700000 2448
		2000034 -11/08/0 ***1035	574424 001050013 ,00 ***1035.00

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

11.	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)(i), Florida Statutes. I release the Division of
	T do necessy dentity that the information supplied was this line in a voluntarity for the exemption stated in decitor (13.07(5)(f), Florida Statides. Helease the Division of
	Corporations from any liability of non-compliance with Section 119.07(3)(i) 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 Cathaline Kinsley

Typed or Printed Name of General Partner Signing Form <u>Cathalene</u> S. <u>Kinsler</u>

_____ DATE October 21, 2000

______ Telephone Number <u>8/3 - 653 - 3945</u>