727-539-0777 Daytme Phone #

DOCUN 1. Entity Name		# A9700	00002623						010227
HRCF BAYSIDE HOTEL LIMITED						FILED			Ą
Principal Place of Business 15201 ROOSEVELT BLVD SUITE 112 CLEARWATER FL 33760 2. Principal Place of Business		Mailing Address 15201 ROOSEVELT BLVD., SUITE 112 CLEARWATER FL 33760		O1 APR 25 PM 12: 14  SECRETARY OF STATE TAIL AHASSEE FLORIDA					
		3. Mailing Address	3. Mailing Address						
Suite, Apt. #,	, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE			
City & State		City & State	City & State		4. FEI Number	59-3480463	Applied For Not Applicable	e	
Zip		Country	Zip	Cour	ntry	5. Certificate of Status Desired S8.75 Additional Fee Required			7
6. Name and Address of Current Registered Agent  HAYDON, ROGERS K JR 15201 ROOSEVELT BLVD., SUITE 112  CLEARWATER FL 33760				Name Street Addre	7. Name and Address of New Registered Agent ress (P.O. Box Number is Not Acceptable)				
					City		F	Zip Code	
SIGNATURE		submits this statement for printed name of registered agent	or the purpose of changi			stered agent, or both,	in the State of Florida.		
SIGNATURE	ignature, typed or ributions 1 record.	\$1,600,000.00  ENERAL PARTNER	and title if applicable.  10. Amount of in FLORID/	(NOTE: Registere Capital Contril A to date.  S ENTITY M	butions 57	uired when reinstating)	11. MAKE CHECK PAYABI SEE REVERSE SIDE I	LE TO DEPT. OF STATE FOR FEE INFORMATION CE.	
SIGNATURE Sign	ignature, typed or ributions 1 record.	\$1,600,000.00  ENERAL PARTNER	10. Amount of in FLORIDATIS A BUSINESSAY NOT be changed	(NOTE: Registere Capital Contril A to date.  S ENTITY M	od Agent signature required butions 52	uired when reinstating)	DATE  11. MAKE CHECK PAYABI SEE REVERSE SIDE I	LE TO DEPT. OF STATE FOR FEE INFORMATION CE. artner.	)
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EQUIRETROGETS K Haydon 4-12-01
Determine Date

SIGNATURE: