404-943.0100

\_ Telephone Number

## ARPHOVEL

TELACE NEAD	ALL INSTRUCT	ION2 REL	JKE C	COMPLETING THIS	EORM.
LIMITED PARTNERSHIP REINSTATEMENT	FLORIDA DEPARTMENT OF STA Katherine Harris Secretary of State DIVISION OF CORPORATIONS		TATE		Y OF STATE SEE: FUORIDA
DOCUMENT # A97000002805  1. Name of Limited Partnership The Clearwater Group, Ltd., a Florida limited partnership				7000065612779 -07/23/0201004007 ******52.50 ******52.50 Z	
Principal Office Address  6000 Lake Forrest Drive  6000 Lake Forrest Drive		2	4. Date Formed or Registered To Do Business in Florida 12/22/97		
Suite, Apt. #, etc. Suite 560	Suite, Apt. #, etc. Suite 560			5. FEI Number         Applied For           58-2361608         Not Applicable	
City & State Atlanta, Georgia	ony a diale			CERTIFICATE OF STATUS DESIRED (X) \$8.75 Additional Fee required for a Certificate of Status	
Zip Country 30328 US	Zip 30328	S100 00		7a. Capital Contributions as shown \$100.00	n on Record:
8. Name and Address of				<b>7b.</b> Amount of Capital Contributions in FLORIDA to date: \$100.00	
Name E.D. Armstrong III, Esquire  Street Address (P.O. Box Number is Not Acceptable) 91-1 Chestnut Street  Suite, Apt. #, Etc.  City Clearwater  State Zip Code 33756				1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 7b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office.  2.) Supplemental Fee(s): \$88.75 for each year due this office, beginning with 1992 catendar year.  3.) Penalty Fee(s): \$500 penalty fee for each year report form is definquent. Note: If the amount entered in 7b is greater than amount entered in 7a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.	
9. 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, and accept the obligations of section 520192, Forida Statutes.  SIGNATURE (Registered Agent Accepting Appointment)  DATE  6/26/02  A GENERAL PARTNER THAT IS A CORPORATION, EMITED PARTNERSHIP OR OTHER BUSINESS ENTITY  MUST BE REGISTERED AND ACTIVE MITTHERSHIP OF OTHER BUSINESS ENTITY					
	DE KEOISTEKEL	AND ACTI	VE WI	TH THIS OFFICE.	C BOSINESS ENTITY
BBR Properties, Inc., a Georgia corporation authorized to transact business in the State of Florida	Address of Each G (Do NOT Use Post Offi  6000 Lake For Suite 560	rrest Dr.		***123	/0201004:-008 38.75 ***1238.75
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.					
11. Ido 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 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 super 620. Florida Statutes. The composition of the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or BBR Properties as required to transact business in Florida.  SIGNATURE  By: Robert N. Hatfield, Jr President  Telephone Number  Telephone Number					