

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

192

2002  
LIMITED  
PARTNERSHIP  
REINSTATEMENT  
UBR



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

2002 NOV 13 AM 9:49

DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

100008966121

11/13/02--01045--008 \*\*526.25

DOCUMENT # A98000000007

1. Name of Limited Partnership

Barrington Family Holdings, LTD.

2. Principal Office Address

3780 NE 31ST AVE

Suite, Apt. #, etc.

City & State

LIGHTHOUSE POINT FL

Zip

33064

Country

USA

3. Mailing Office Address

3780 NE 31ST AVE

Suite, Apt. #, etc.

City & State

LIGHTHOUSE POINT FL

Zip

33064

Country

USA

4. Date Formed or Registered  
To Do Business in Florida

12/26/1997

5. FEI Number

65-0805420

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

7a. Capital Contributions as shown on Record:

8,500,000

7b. Amount of Capital Contributions in FLORIDA to date:

8,500,000

**FEES:**

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

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.

8. Name and Address of Current Registered Agent

Name BRUCE D BARRINGTON

Street Address (P.O. Box Number is Not Acceptable)

3780 NE 31ST AVE

Suite, Apt. #, Etc.

City

LIGHTHOUSE POINT

State

FL

Zip Code

33064

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. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

*[Signature]*

DATE

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY  
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

10. Name(s) of General Partner(s)

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

City, State and Zip Code

10a. Registration  
Document Number

BARRINGTON, BRUCE D

3780 NE 31ST AVE

LIGHTHOUSE PT, FL 33064

BARRINGTON, GAILE M

3780 NE 31ST AVE

LIGHTHOUSE PT, FL 33064

**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 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

*[Signature]*

DATE

11/10/2002

Typed or Printed Name of General Partner Signing Form

BRUCE D BARRINGTON

Telephone Number

954/782-4779

CR2E039 (10/02)

292

*Mr. Bruce D. Barrington*  
3780 NE 31<sup>st</sup> Avenue  
Lighthouse Point, FL 33064

FILED

2002 NOV 13 AM 9:49

DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

November 11, 2002

Florida Department of State  
Division of Corporations  
Attn: Partnership Section  
P.O. Box 6327  
Tallahassee, FL 32314

Dear Sirs,

Attached find a completed Limited Partnership Reinstatement Form accompanied by the filing fee. Please note that my address has changed. Prior to receiving a certificate of revocation, I had received no correspondence from the State of Florida concerning this partnership.

Thank you for your attention to this matter.

Sincerely,



Bruce D. Barrington  
General Partner  
Barrington Family Holdings, LTD.  
FEI: 65-0805420