

A98000000817

FILED

2003 JAN 28 PM 2:04

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**LIMITED
PARTNERSHIP
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **A98000000817**

1. Name of Limited Partnership

**Ashley Crossings Apartment Homes of Florida,
Limited Partnership**

900011778739
02/04/03--01039--005 **3096.50

2. Principal Office Address

90 Tifton Way N.

Suite, Apt. #, etc.

3. Mailing Office Address

PO Box 2108

Suite, Apt. #, etc.

4. Date Formed or Registered
To Do Business in Florida

5. FEI Number

59 3516438

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$5.75 Additional Fee required
for a Certificate of Status

7a. Capital Contributions as shown on Record:

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

City & State

Ponte Vedra Beach FL.

City & State

Ponte Vedra Beach FL.

Zip

32082

Country

St. Johns

Zip

32004

Country

St. Johns

8. Name and Address of Current Registered Agent

Name

Charles E. Hartman

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

90 Tifton Way N.

Suite, Apt. #, Etc.

City

Ponte Vedra Beach

State

FL

Zip Code

32082

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 1982 calendar year.

3.) Penalty Fee(s): \$500 penalty fee for each year return 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.

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)

Charles E. Hartman

DATE **1-27-03**

**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)

**Mason-Phillips Properties
of Fla. IV, Inc.**

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

90 Tifton Way N.

City, State and Zip Code

**Ponte Vedra Beach
FL. 32082**

10a. Registration
Document Number

REINSTATEMENT

2001, 2002

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

Vanessa L. Hartman Pres.

DATE **1-27-03**

Typed or Printed Name of General Partner Signing Form

Vanessa L. Hartman

Telephone Number **904-285-4994**

**CORPORATE
ACCESS,
INC.**

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 Fax (850) 222-1666

WALK IN

PICK UP 1-28-03

☐ CERTIFIED COPY

☒ CUS

95 (2 cpts)

☒ PHOTO COPY

☒ FILING

Reinstatement

1.) Ashley Crossings Apartment Homes of Florida, Limited Partnership
(CORPORATE NAME & DOCUMENT #)

2.) _____
(CORPORATE NAME & DOCUMENT #)

3.) _____
(CORPORATE NAME & DOCUMENT #)

4.) _____
(CORPORATE NAME & DOCUMENT #)

5.) _____
(CORPORATE NAME & DOCUMENT #)

SPECIAL INSTRUCTIONS _____

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03 JAN 28 AM 10:34
DIVISION OF CORPORATION