AGRICOCOCOS SIGNESS FORM.

LIMITED PARTNERSHIP REINSTATEMENT

SIGNATURE By:

Typed or Printed Name of General Partner Signing Form



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 49800000082-S

1. Name of Limited Partnership
ASPENWOOD ASSOCIATES, LTD.

FILED 2002 DEC 10 PM12: 07

DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

2. Principal Office Add	3. Mailing Office Address				4. Date Formed or Registered To Do Business in Florida 4/1/1998					
930 SOUTH OCEAN BLVD.		777 S. FLAGLER DRIVE								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. FEI Number Applied For				
•	500 EAST - CRIPPEN						X	Not Applicable		
City & State	City & State				CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status					
PALM BEACH,	WEST PALM BEACH, FL				70 0 - 11 0 - 11 1 1 1 1 1 1 1 1 1 1 1 1 1	Danadi				
Zip	Country	Zip Country				7a. Capital Contributions as shown on Record: \$550,000.00				
33480	USA	33401		USA		7b. Amount of Capital Contributions in FLORIDA to date:				
8. Name and Address of Current Registered Agent						-0 -				
Name						FEES:				
VALDES-FAULI CORPORATE SERVICES, INC.						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.				
Street Address (P.O. Box Number is Not Acceptable) 777 SOUTH FLAGLER DRIVE										
Suite, Apt. #, Etc.	GLER DRIVE					 Supplemental Fee(s): \$88.75 for <u>each year due</u> this office, beginning with 1992 calendar year. 				
SUITE 500 EAS	ST ·					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				
City			State	Zip Code		7a, a supplemental affidavit must be submitted along with a separate and appropriate filing fea.				
WEST PALM BEA	ACH .		FL 33401			and appropriate illing lee.				
Valdes-Faxili Corporate Services, Inc. SIGNATURE (Registered Agent Accepting Appointment) By: DATE 12/ DATE 12/ 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)	Addre	Address of Each General Partner (Do NOT Use Post Office Box Numbers)			City, State and Zip Code	10a.		egistration ment Number	
Aspenwood Ass	ociates GP 1999,In	<u> </u>		Palm Beach, FL 33480		P99000047595				
				-						
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REINSTATEMENT 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 filling 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.										

George Mann, President of Gen. Partner



Our File Number: 21600.00001 Writer's Direct Dial Number: (561) 650-0728 Writer's E-Mail Address: proehl@gunster.com

December 9, 2002

Michelle Milligan Florida Department of State Corporations Division 409 East Gains Street Tallahassee, FL 32399

RE: Reinstatements

Dear Michelle:

Enclosed are the following documents:

- 1. Corporation Reinstatement for Aspenwood Associates GP 1999, Inc.
- 2. Check Number 1569 in the amount of \$750.00 to cover the costs incurred in filing the Corporation Reinstatement.
- 3. Limited Partnership Reinstatement for Aspenwood Associates, Ltd.
- 4. Check Number 1568 in the amount of \$1,026.25 to cover the costs incurred in filing the Limited Partnership Reinstatement.

Please proceed with filing the documents and return the verifications to my attention in the enclosed envelope.

Please call me if you have any questions or comments.

Thank you and Happy Holidays!

Veryntruly yours,

Patti Roehl Paralegal

Enclosures 683779