

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

01 FEB 13 AM 11:59

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LIMITED  
PARTNERSHIP  
REINSTATEMENT  
2000-2001



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # A98000000994

1. Name of Limited Partnership

SWF Development Limited Partnership

2. Principal Office Address

6100 Mid Metro Drive

3. Mailing Office Address

6100 Mid Metro Drive

Suite, Apt. #, etc.

Suite 7

Suite, Apt. #, etc.

Suite 7

City & State

Fort Myers, FL

City & State

Fort Myers, FL

Zip

33912

Country

USA

Zip

33912

Country

USA

8. Name and Address of Current Registered Agent

Name

Joseph M. Madden, Jr.

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

6100 Mid Metro Drive

Suite, Apt. #, Etc.

Suite 7

City

Fort Myers

State

FL

Zip Code

33912

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 1/19/01

**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
Crown Colony Management, Inc.	6100 Mid Metro Drive Suite 7	Fort Myers, FL 33912	P98000030502
2000 - 500 - 437.75 2001 500 437.75 8.75	88.75 88.75		000003742970--1 -02/20/01--01048--009 ***2061.00 ***2061.00 2000- 2001

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]*

President Crown Colony Management, Inc.

DATE 1/19/01

Typed or Printed Name of General Partner Signing Form

Peter A. Tschernitz

Telephone Number

941 936 3881

CR2E03S (11/99)

**SWF DEVELOPMENT LIMITED PARTNERSHIP**  
6100 MID METRO DRIVE, SUITE 7  
FORT MYERS, FLORIDA 33912

February 5  
January 19, 2001

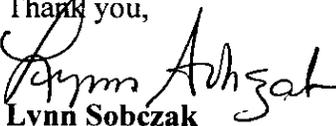
**Division of Corporations**  
**Attn: Partnership Section**  
**P.O. Box 6327**  
**Tallahassee, Florida 32314**

Re: Reinstatement Form

To Whom It May Concern:

Enclosed please find our application for reinstatement with a check in the amount of  
~~\$1,035.00.~~ 2061.00

Thank you,

  
Lynn Sobczak