(407) 333-3233 Daytime Phone #

4-25-2000 of Orlando, Inc.

2000	UNIFO	RM BL	<b>JSINESS</b>	<b>REPORT</b>	(UBR
------	-------	-------	----------------	---------------	------

SIGNATURE:

1. Entity Nam		00002177			¥		
DUNWO	ODIE OF ORLANDO, LTD.				FILED		
Principal Place of Business 615 CRESCENT EXECUTIVE COURT. SUITE 120 615 CRESCENT EXECUTIVE LAKE MARY FL 32746 615 CRESCENT EXECUTIVE LAKE MARY FL 32746-2120				T. SUITE 120	OO APR 26 AM 8:57  SECRETARY OF STATE TALLAHASSEF FLORIDA		
2. Principal P	lace of Business	3. Mailing Address	·		- ( ) 1919/1919 (1919) (1919) (1919) (1919) (1919) (1919) (1919) (1919) (1919) (1919)		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		· · · · · ·	DO NOT WRITE IN THIS SPACE		
City & Stat	е	City & State	· · · · ·		4. FE! Number 59-3537515	Applied For Not Applicable	}
Zip	Country	Zip	Coun	itry	5. Certificate of Status Desired 🛣	\$8.75 Additional Fee Required	
	6. Name and Address of Current	Registered Agent			7. Name and Address of New Registered	Agent	1
GRAV N	DIMANNE ID ESO			Name			
GRAY, N. DWAYNE JR, ESQ C/O GREENSPOON, MARDER, ET AL 135 WEST CENTRAL BLVD., SUITE 1100				Street Addres	s (P.O. Box Number is Not Acceptable)		-
	) FL 32801		١	City	F	Zip Code	1
SIGNATURE .	Signature, typed or printed name of registered agent	t and title if applicable	(NOTE: Registere	d Agent signature requ	11. MAKE CHECK PAYAB		
as Shown	A GENERAL PARTNER	in FLORIDA	S ENTITY M	3,002,900 UST BE REGI	STERED AND ACTIVE WITH THIS OFFIC	OR FEE INFORMATION	}
12.			on the form	i; an amenom	ent must be filed to change a general part and ADDRESS CHANGES O		}
DOCUMENT # NAME STREET ADDRESS	GENERAL PARTNER INFORMATION P98000080107 DUNWOODIE OF ORLANDO, INC. 615 CRESCENT EXECUTIVE COURT, SUITE 120			EET ADORESS			CR2E00(1 (9/9.3)
CITY-ST-ZIP	LAKE MARY FL 32746			-ST-ZIP			RZEO
Document # Name	, ·		STRE	EET ADORESS			]°
STREET ADDRESS City-St-21P	ess , , , , , , , , , , , , , , , , , ,			6000032415		5889	
DOCUMENT# NAME			STRE	EET ADDRESS	***2285.00	<del>01092-027</del> ****\$35.00	}
STREET ADDRESS CITY-ST-ZIP			спу	-ST-ZIP			
DOCUMENT# NAME			STRE	EET ADDRESS			 
STREET ADDRESS CITY - ST - ZIP			CITY	-ST-ZIP			-
DOCUMENT # NAME			STRE	EET ADDRESS			1
STREET ADDRESS CITY-ST-ZIP			CITY	'-ST-ZBP			
DOCUMENT# NAME			STRE	EET ADDRESS			<u> </u>
STREET ADDRESS CITY-ST-ZIP	·			-ST-ZIP			
indicated	certify that the information supplied wit on this report is true and accurate and ver or trustee empowered to execute the	d that my signature shall :	have the same	e legal effect as .	Section 119.07(3)(i), Florida Statutes <u>I furt</u> her of if made under oath; that I am a General Partner	ertify that the information of the limited partnership or	{

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER TOOL I. BOTCK, President of Dunwoodie