

2004 LIMITED PARTNERSHIP REINSTATEMENT

DOCUMENT# A98000002375

FILED
Oct 25, 2004
Secretary of State

Entity Name: N.D. KING FAMILY LIMITED PARTNERSHIP

Current Principal Place of Business:

475 RIFLE RANGE ROAD
BARTOW, FL 33830

New Principal Place of Business:

P.O. BOX 37
MYAKKA CITY, FL 34251

Current Mailing Address:

P.O. BOX 815
BARTOW, FL 338310815

New Mailing Address:

P.O. BOX 37
MYAKKA CITY, FL 34251

FEI Number: 65-0865099 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

Name and Address of Current Registered Agent:

KING, MICHAEL L
475 RIFLE RANGE ROAD
BARTOW, FL 33830 US

Name and Address of New Registered Agent:

KING, MICHAEL L
4317 STATE ROAD 70 EAST
MYAKKA CITY, FL 34251 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

10/25/2004

Date

Capital Contributions as Shown on record: 2,974,312.00

Amount of Capital Contributions in Florida to date: 2,974,312.00

GENERAL PARTNER INFORMATION:

ADDRESS CHANGES ONLY:

Document #:

Name: KING, MICHAEL L
Address: 6018 WOATERWOOD TRAIL
City-St-Zip: BARTOW, FL 33830

Address: P.O. BOX 37
City-St-Zip: MYAKKA CITY, FL 34251

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: MICHAEL L. KING

GP

10/25/2004

Electronic Signature of Signing General Partner

Date