PLEA	SE READ ALL IN	STRUCTIONS	BEFORE C	OMPLETING "	THIS FORM.
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LIMITED PARTNERSHIP REINSTATEMENT 2000	FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	17 SEE					
DOCUMENT# 1. Name of Limited Partnership Los///2s Realt	98000002605 y Limited Partnership	JANA 6: WE PLORE					
2. Principal Office Address	3. Mailing Office Address	4. Date Formed or Registered To Do Business in Florida					
Hozz Losillies Dr. Suite, Apt. #, etc.	Same Suite, Apt. #, etc.	To Do Business in Florida 1 24 98 5. FEI Number Applied For					
Suite, Apt. #, etc.	Suite, Apr. #, etc.	65-0877165 Not Applicable					
City & State Sarasota, FL	City & State 3 4 4 3 8	CERTIFICATE OF STATUS DESIRED (\$8.75 Additional Fee required for a Certificate of Status					
Zin Country	Zip Country	7a. Capital Contributions as shown on Record 3, 000,000					
34238 Sarasita	same same	7b. Amount of Capital Contributions in FLORIDA to date:					
	of Current Registered Agent	8, 227, 0/2-					
H. Greg Lee		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					
Street Address (P.O. Box Number is Not Acceptable	a) ↑						
Suite, Apt. #, Etc.		with 1992 calendar year.					
City Seresote	State	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. 100103553311 1011085-009 SIGNATURE (Registered Agent Accepting Appointment)							
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					
Losillies Realty, I	nc. 4022 Losilles Dr.	Seresote, FL 3438 P9800002301					
REIN.	STATEMENT						
. 1999	2000	X. The state of th					
į. S							
Note: General partners MAY NOT	 I be changed on this form; an amen	dment 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 event from public access. I further certify that the information indicated							
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							

Typed or Printed Name of General Partner signing Form

Corporations from printed with printed with a security from product 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 of trustee empowered to execute this report as required by chapter 60. Florida Statutes.

SIGNATURE

DATE

Telephone Number



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

December 13, 2000

LOSILLIAS REALTY LIMITED PARTNERSHIP 4022 LOSILLIAS DRIVE SARAOSTA, FL 34238

SUBJECT: LOSILLIAS REALTY LIMITED PARTNERSHIP

Ref. Number: A9800002605



We have received your document for LOSILLIAS REALTY LIMITED PARTNERSHIP and check(s) totaling \$1035.00. However, your check(s) and document are being returned for the following:

You have indicated in block 10 or 7b on the document that the contributions of the limited partners have gone beyond what we currently have on file. A supplemental affidavit must be filed pursuant to chapter 620, Florida Statutes. The filing fee is based on the additional amount of contributions calculated at a rate of \$7 per \$1000 with a minimum filing fee of \$52.50 and a maximum filing fee of \$1750.

The fee to file the supplemental affidavit is \$1589.08 and the fee to file the annual report/uniform business report is \$2052.50. The total fee due for both filings is \$3641.58. Please return the supplemental affidavit and the annual report/uniform business report together with the appropriate fee.

Please return your document, along with a copy of this letter, within 30 days or vour filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6051.

Registration/Qualification Section Division of Corporations Letter Number: 500A00025468