

JUN. 21. 2007 9:40AM

C S C

NO. 367

P. 2/3

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07 JUN 21 PM 1:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED PARTNERSHIP REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # A99000000947 1. Name of Limited Partnership ISLAND CLUB B LIMITED PARTNERSHIP			
2. Principal Office Address 5510 MOREHOUSE DR Suite, Apt. #, etc. STE 200		3. Mailing Office Address Suite, Apt. #, etc. City & State Zip 92121 Country USA	
City & State SAN DIEGO, CA		City & State Zip Country 	
4. Date Formed or Registered To Do Business in Florida JUNE 11, 1999			
5. FEI Number 52-2174838		Applied For Not Applicable	
6. CERTIFICATE OF STATUS DESIRED ☒ \$3.75 Additional Fee required for a Certificate of Status			
7. FEES: Filing Fee(s): \$411.25 for each year due this office. Supplemental Fee(s): \$68.75 for each year due this office. Penalty Fee(s): \$500 for each year or part thereof limited partnership revoked on our records			
8. Name and Address of Current Registered Agent Name CORPORATION SERVICE COMPANY Street Address (R.R., Box Number is Not Acceptable) 1201 HAYS STREET Suite, Apt. #, Etc. City TALLAHASSEE State FL Zip Code 32301			
9. Pursuant to the provisions of section 620.1810 or 620.1908, Florida Statutes, I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of Chapter 620, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment) <u>Sarah K. Drake</u> Sarah K. Drake as its agent DATE <u>6/21/07</u>			
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
ISLAND CLUB GP LLC	5510 MOREHOUSE DR STE 200	SAN DIEGO, CA 92121	104000005264
REINSTATEMENT 05-07			
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 exemptions contained in Chapter 119, Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Chapter 119, F.S. in the event that the information supplied is deemed exempt from public access. I further certify that the information disclosed on this annual report is true and accurate and that my signature shall have the same legal effect 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 <u>Richard Swanson</u>		DATE <u>6/20/07</u>	
Typed or Printed Name of General Partner Signing Form <u>Richard Swanson</u>		Telephone Number <u>(358) 812-6711</u>	

* VP of FF Properties, Inc, the managing member of FF Island Club LLC, the managing member of Fairfield Island Club LLC, the managing member of Island Club GP LLC

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Florida Department of State

Division of Corporations
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LP/LLP REINSTATEMENT

ISLAND CLUB B LIMITED PARTNERSHIP

Certificate of Status	1
Certified Copy	0
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