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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: CSR Holiday, Ltd. (Name of Limited Partnership)	
The enclosed Supplemental Affidavit and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Sharon Romano, Secretary	
(Name of Person)	
Root Real Estate Corp.	
(Firm/Company)	
275 Clyde MOrris Blvd.	
(Address)	·
Ormond Beach, FL 32174	=
(City/State and Zip Code)	A:12 A:12 A:12 A:12 A:12 A:12 A:12 A:12
For further information concerning this matter, please call:	IN IN I I I
Sharon Romano at (386) 671-4908	
(Name of Person) (Area Code & Daytime Telephon	ie Number) ==

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FLORIDA LIMITED PARTNERSHIP

The undersigned g	general partne	ers of			
CSR Holiday,	Ltd.			, a	
Florida Limited Pa Florida Statutes.	artnership, ex	secuted this supplemental at	ffidavit filed pursuan		12,
The total amount of	of the capital	contributions of the limited	partners is: \$ <u>1,81</u>	8,749.	
This 30 4 day	of Man	rch	, 2005	• • •	
FURTHER AFFI	IANT SAYE	TH NOT.			
Under penalties oj best of my knowled		eclare that I have read the fo f.	regoing and that the	facts are true, to	'he
		General Partner(s)		
Root Real Estate Corp. RDT, L.L.C. Philip Maroney, Sr. Vice Pres/Manager Fees: \$7 per \$1000, based on additional contributions		2095 AFR 27 A II: 47 SECRETARY OF STATE TALLARASSEE, FLORIE,			
		finimum \$ 52.50			

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314