SME AND SOURCE FOREST ROAD SINTE 20 SUITE 20 SUI	DOCUMENT # A9900001492 I. Entity Name FLORIDA II BLUE MIST LIMITED PARTNERSHIP							FILED 02 JAN 16 PM 2: 55			
Suite, R.p.f. etc. Suite, Apt. #. etc. Suite, Apt. #. etc. DUE BY MAY 1, 2002 Applied For Cry & State City & State City & State City & State City & State Country Country Country Socreticate of Status Desired \$5. Certificate of Status Desired \$5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TURNER, SUSAN K 8083 34TH STREET W. #56 BRADENTON FL 34205 City FL Zip Codo Since: Address (P.C. Box Number is Not Acceptable) S	SUITE 201				3404 WAKE FOREST ROAD SUITE 201						
City & State City & State City & State City & State Country C	2. Principal Place of Business				3. Mailing Address			-			
Zip Country Zip Country S. Certificate of Status Desired S.75 Additional row Regulational Repail Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) TURNER, SUSAN K (S033 4TH STREET W. #56 BRADENTON FL 34205 City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Rorida. SIGNATURE Symbol 3 perind name of registered agent and that reposition is RFL (RID) to date 9. Capital Contributions \$90.00 10. Ampount of Capital Contributions is REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: Centeral Partners MAY NOT be changed on the form, an amendment must be filled to change a general partner. 12. GENERAL PARTNER INFORMATION 13. ADDRESS CHANNES ONLY PRODUMENT A REPORT OF STATE OF THE ADDRESS ONLY 14. ADDRESS CHANNES ONLY SIRET ADDRESS CITY-ST-ZP CITY-ST-ZP THEET ADDRESS CITY-ST-ZP THE THE THE THE THE THE THE TH	Suite, Apt. #, etc.				Suite, Apt. #, etc.			DUE BY MAY 1, 2002			
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TURNER, SUSAN K 9033 34TH STREET W. #56 BRADENTON FL 34205 City FL Zip Code 8. 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 9. Capital Contributions as Shown on record. A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner. 12. GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner. 12. GENERAL PARTNER INFORMATION 13. ADDRESS CHANGES ONLY DOCUMENT / MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSES SINCE PROFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner. 14. GENERAL PARTNER INFORMATION 15. ADDRESS CHANGES ONLY DOCUMENT / MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSES SINCE PROFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner. 15. GENERAL PARTNER INFORMATION 15. ADDRESS CHANGES ONLY DOCUMENT / MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSES SINCE ADDRESS CHANGES ONLY SIRET ADDRESS CITY-ST-2P CITY-ST-2P STREET ADDRESS	Zip	ip Country			Zip Count		try			.75 Additional	
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BRADENTON FL 34205 City FL Zip Code City FL Zi	TURNER,	SUSAN K									
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14. I hereby certify that the information supplied with his Hing does not qualify 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 rify a gnature 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 empewered to execute this report as required by Chapter 620 Porida Statutes	14 Lhorobu o	L certify that t k	e information supplied w	ith/his ##	ng does not qualify for	the exe	mption stated in Se	ection 119.07(3)(i)	Florida Statutes. I fur	rther certify I	that the information

SIGNATURE:

STAPLE CHECK HERE

SIGNATURE REQUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1-10-02 919-850-0850

Date Daytime Phone #