18227 CUTLASS DRIVE

ADDRESS FORT MYERS BEACH, FL 33931

RA NAME : YORK, RONALD W

RA ADDR : 18227 CUTLASS DRIVE

FORT MYERS BEACH, FL 33931 US

ANN REP : \* NONE FILED \*

1. MENU, 3. PARTNERS, 4. EVENTS

ENTER SELECTION AND CR:

900004448189--4 -06/28/01--01001--006 \*\*\*\*\*52.50 \*\*\*\*\*52.50

F\$52.50



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 30, 2001

FOURTH YORK FAMILY LIMITED PARTNERSHIP 18227 CUTLASS DRIVE FORT MYERS BEACH, FL 33931

SUBJECT: FOURTH YORK FAMILY LIMITED PARTNERSHIP

Ref. Number: A99000002078

We have received your document for FOURTH YORK FAMILY LIMITED PARTNERSHIP and check(s) totaling \$1282.50. 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.

Our records show your amount of invested capital as "0", if you are now increasing your invested capital to \$5000.00. Please complete the attached supplemental affidavit and return it with a \$52.50 filing fee. If you have listed the \$5000.00 in error, please delete it from 7b. of the reinstatement form.

Please return your document, along with a copy of this letter, within 30 days or your 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: 701A00032909





## FLORIDA DEPARTMENT OF STATE

Secretary of State

## SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FLORIDA LIMITED PARTNERSHIP

				# Ē			
The undersigned genera	I partners of	FOURTH (FE	YORK P	<u>amily l</u> 05-1077	imite 319)	<u>ed</u>	
Florida Limited Partner	ship, executed	this supplement	al affidavit file	d pursuant to	section	620.1	112,
Florida Statutes.		**	-			-	
The total amount of the This 27th day of	_	ibutions of the li		2.	01.00	<u>.</u> .	
FURTHER AFFIAN  Under penalties of perthe best of my knowle	jury I declare	that I have read	the foregoing	and that the f	acts are	e tru	e, to
, ,			eral Partner(s)				
-	Roman V	J M G	-P	=0.7	SEQNE IANT OF STATE TALTIAHASSEE FLORIDA	01 JUN 26 AM 9: 28	
	\$7 per \$1,00 (Minimum \$	<u>FEES:</u> 0 based on the a 52.50 - Maximur	dditional conti	ributions			

INHSE20(3/95)