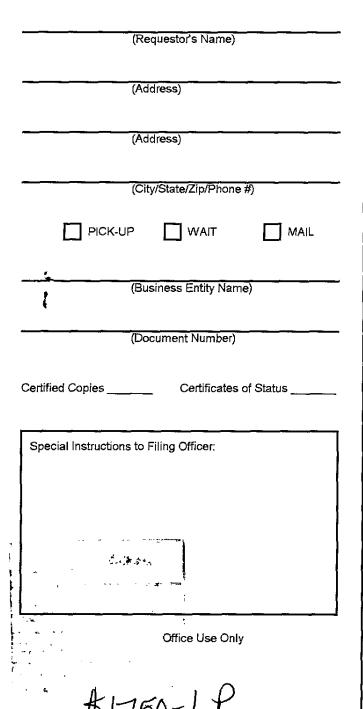
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05/13/05--01016--004 \*\*2276.25

200 200 259

moreosing contributions

## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: KTTI NACO, LP	_
(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:	
Walter Jaccard (Name of Person)	
(Name of Person)	
Thousand Trails, LP (Firm/Company)	
2 27	
3801 Parkwood Blud, Ste 100	
(Address)	<u></u>
Frisco, Tx 75034  (City/State and Zip Code)	
(City/State and Zip Code)	ū
	Ţ
For further information concerning this matter, please call:	<i>⇔</i>
	59
Sonya Schne, der at (214) 618-7292  (Name of Person) (Area Code & Daytime Telephone Number)	
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**	

STREET ADDRESS: Registration Section

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

Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

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

The undersigned general partners of KTTINACO, LP
a (an) Limited Partnership, executed this
supplemental affidavit filed pursuant to section 620.176, Florida Statutes. The total amount of
the capital contributions of the limited partners allocated for the purpose of transacting
business in Florida is: \$ 357, 000.
Signed this $\frac{28}{28}$ day of $\frac{\beta_{pril}}{\frac{1}{2005}}$ , $\frac{2005}{\frac{1}{2005}}$ .
FURTHER AFFIANT SAYETH NOT.
Under penalties of perjury, I declare that I have read the foregoing and that the facts are true,
to the best of my knowledge and belief.
General Partner
BD rail UP OF TRAILS GP, LLC

## FEES:

\$7 per \$1,000 based on the additional contributions (Minimum \$52.50 - Maximum \$1,750.00)

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