

DOB00000003/6

Linda M. Watson, CPA  
(Requestor's Name)

(Address)

P.O. Box 291190  
(Address)

Port Orange, FL 32129  
(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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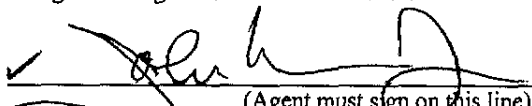
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M. HODGES

05/11/05 10:00 AM

APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR  
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

1. ORANGE CITY LIMITED PARTNERSHIP  
(Name of limited partnership as it is in the home state)
2. \_\_\_\_\_  
(If name is unavailable, name under which the limited partnership proposes to register or transact business in Florida;  
must contain the word "LIMITED" or "LTD.")
3. DELAWARE 4. 3/22/04  
(State of Formation) (Date of Formation)
5. JOHN T. HANTON  
(Name of Registered Agent for Service of Process)
6. 949 BEVILLE ROAD  
(Street Address of Registered Office)
- SOUTH DAYTONA, Florida 32119  
(City) (Zip Code)
7. Acceptance by the Registered Agent for Service of Process:  
  
(Agent must sign on this line)
8. 271 CENTERVILLE ROAD, SUITE 400  
WILMINGTON, DELAWARE 19808  
(Address of registered office required in state of formation or, if not required, address of principal office.)
9. NAMES OF GENERAL PARTNERS STREET ADDRESS
- |                       |                                 |
|-----------------------|---------------------------------|
| <u>JOHN T. HANTON</u> | <u>949 BEVILLE RD.</u>          |
|                       | <u>SOUTH DAYTONA, FL. 32119</u> |
10. 949 BEVILLE RD. SOUTH DAYTONA FL. 32119  
(Office where Names, Addresses and Contributions of Limited Partners are kept.)

11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.

CONTINUED

12. 949 BEVILLE ROAD

SOUTH DAYTONA, FL. 32119  
(Mailing Address of Limited Partnership)

Under penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 14<sup>th</sup> day of July, 2005.

[Signature]  
General Partner  
STATE OF Florida

COUNTY OF Volusia

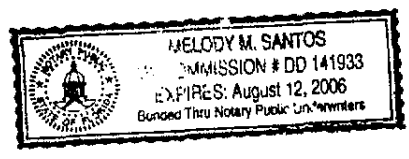
On this 14<sup>th</sup> day of July, 2005.

John T. Hinton, Jr., personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of \_\_\_\_\_

[Signature]  
(Notary Public Signature)  
Melody M. Santos  
(Notary's Printed Name)



Seal My Commission Expires: 8/12/2006

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP**

BEFORE ME the undersigned personally appeared JOHN T. HINTON  
a general partner of ORANGE CITY LIMITED PARTNERSHIP (an) DELAWARE  
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 18,000.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ —.

*Under the penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.*

Signed this 14<sup>th</sup> day of July, 2005.

[Signature]  
General Partner

STATE OF Florida  
COUNTY OF Volusia

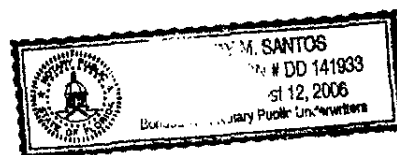
On this 14<sup>th</sup> day of July, 2005,

John T. Hinton, Jr, personally appeared before me,

- ☒ who is personally known to me  
☐ whose identity I proved on the basis of \_\_\_\_\_

[Signature]  
(Notary Public Signature)

Melody M. Santos  
(Notary's Printed Name)



Seal

My Commission Expires: 8/12/2006

