

Document Number Only

1395000000133

C T CORPORATION SYSTEM  
Requestor's Name  
1311 Executive Center Drive, Ste. 200  
Address  
Tallahassee, FL 32301 (904) 656-8298  
City State Zip Phone

000001459430  
-04/18/95--01100--022  
\*\*\*1750.00 \*\*\*1750.00  
000001459430  
-04/18/95--01100--023  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

95 APR 18 PM 1:51  
DIVISION OF CORPORATIONS  
SECRETARY OF STATE

CORPORATION(S) NAME

END LTD.

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Profit                         | <input type="checkbox"/> Amendment              | <input type="checkbox"/> Merger             |
| <input type="checkbox"/> NonProfit                      | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark               |
| <input checked="" type="checkbox"/> Foreign             | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Other              |
| <input checked="" type="checkbox"/> Limited Partnership | <input type="checkbox"/> Reservation            | <input type="checkbox"/> Change of R.A.     |
| <input type="checkbox"/> Reinstatement                  | <input type="checkbox"/> Photo Copies           | <input type="checkbox"/> Fictitious Name    |
| <input type="checkbox"/> Certified Copy                 | <input type="checkbox"/> CUS / G/S              |   |
| <input type="checkbox"/> Call When Ready                | <input type="checkbox"/> Call if Problem        | <input type="checkbox"/> After 4:30         |
| <input checked="" type="checkbox"/> Walk In             | <input type="checkbox"/> Will Wait              | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out                       |   |   |

Name  
Availability  
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CR2E031 (1-89)

PLEASE RETURN EXTRA COPY(S)  
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4/13/95 3:00  
4/13/95  
1750  
35  
1785  
by CT

Florida Department of State, Jim Smith, Secretary of State

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

1. FND LTD.  
(Name of limited partnership as it is in the home state;)

2. FND LTD.  
(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. TEXAS 4. April 3, 1995  
(State of Formation) (Date of Formation)

5. C T CORPORATION SYSTEM  
(Name of Registered Agent for Service of Process)

6. c/o C T Corporation System, 1200 South Pine Island Road  
(Street Address of Registered Office)

Plantation, Florida 33324  
(City) (Zip Code)

7. Acceptance by the Registered Agent for Service of Process.

[Signature]  
(Officer must sign on this line)  
Kirk Hood, Asst. Secretary  
(Type Name and Title of Officer)

8. 910 Louisiana, Houston, TX 77002-4995  
(Address of Registered Office required in State of Formation or, if not required, Address of Principal Office.)

9. NAME OF GENERAL PARTNER

Estuary Corporation

SPECIFIC ADDRESS

5050 Edgewood Court  
Jacksonville, FL 32205

153 521

10. 5050 Edgewood Court, Jacksonville, FL 32205  
(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 cancelled or withdrawn.

12. 5050 Edgewood Court, Jacksonville, FL 32205  
(Mailing Address of Limited Partnership)

This 3rd day of April, 1995.

ESTUARY CORPORATION

General Partner

BY: H. J. Shelton

TITLE: V. P.

STATE OF

COUNTY OF

THE FOREGOING instrument was acknowledged and sworn to before me this 3rd day of April, 1995, by ESTUARY CORPORATION (Name of General Partner) of FND, LTD.

(Name of Limited Partnership), A TEXAS (State or Country) Limited Partnership, on behalf of the Limited Partnership.

Janean C. Baker

Notary Public

State of FLORIDA at Large

(SEAL)



Notary Public, State of Florida  
JANEAN C. BAKER  
My Comm. Exp. Apr. 21, 1995  
Comm. No. CC 693685

My Commission Expires:

4-21-95

FILED  
STATE  
SECRETARY OF CORPORATIONS  
DIVISION OF CORPORATIONS  
95 APR 13 PM 1:57

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS**

BEFORE ME, the undersigned, personally appeared H. J. Skelton, Vice President  
General partner of FND LTD. of Estuary Corporation, a  
Texas, limited partnership, hereinafter referred to as the "Partnership", who  
certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 79,954,910.69.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 79,954,910.69.

This 3rd day of April, 1995.

**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  
Estuary Corporation, a Florida corporation

BY: H. J. Skelton  
TITLE: V.P.

STATE OF FLORIDA  
COUNTY OF DUVAL  
DATE APRIL 3, 1995

BEFORE ME, the undersigned officer, a Notary Public authorized to administer oaths and to take acknowledgments in and for the State and County set forth above, personally appeared H. J. SKELTON, V.P., ESTUARY CORP. (General Partner, known to me and known by me to be the person who executed the foregoing Affidavit of Capital Contributions, and he acknowledged to me and before me that he executed this Affidavit as General Partner of said partnership.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this 3rd day of April, 1995.



Notary Public, State of Florida  
JANEAN C. BAKER  
My Comm. Exp. Apr. 21, 1995  
Comm. No. CC 093685

Janean C. Baker  
Notary Public  
State of Florida at Large  
My Commission Expires:  
APRIL 21, 1995

FILED STATE  
SECRETARY OF  
DIVISION OF  
95 APR 3 PM 1:57

FILE ON OR BEFORE DECEMBER 31, 1995 OR PARTNERSHIP  
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra Mortonham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

95 DEC 14 PM 2 00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Name of Limited Partnership:

1a. DOCUMENT #  
**B95000000133**

**FND LTD.**

96 AR  
CM

Mailing Address

5080 EDGEWOOD COURT  
JACKSONVILLE FL 32205

Principal Office Address

910 LOUISIANA  
HOUSTON TX 77002-4885

2. New Mailing Address, If Applicable

Suite, Apt. #, etc.

200001667-132

-12/21/95--01008--028

City, State & Zip

\*\*\*\*576.25 \*\*\*\*576.25

2a. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City, State & Zip

3. Date Formed or Registered to Do Business in

FLORIDA 04/12/1995

3a. Date of Last Report

N/A

4. State or Country of Formation

TX

5a. Capital Contributions as Shown on Record

\$79,954,910.60

5b. Amount of Capital Contributions in FLORIDA to date

79,954,910.69

6. FEI Number

59-3302970

Appl. Fed. For

Not Applicable

7. CERTIFICATE OF STATUS REQUIRED

8. FEES: 1.) Filing Fee: Computed at a rate of \$7 per \$1,000 on amount entered in 5b or 5a if 5b blank, with a minimum filing fee of \$52.50 and a maximum of \$437.50  
2.) Supplemental Fee: \$138.75 (pursuant to section 607.193, F.S.)  
THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$138.75) AND NO MORE THAN \$576.25 (\$437.50 + \$138.75)

Note: If the amount entered in 5b is greater than amount entered in 5a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee  
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE.

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc.

City

FL

Zip Code

10a. Pursuant to the provisions of sections 620.101 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY

11. Name(s) of General Partner(s)

ESTUARY CORPORATION

11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers)

5050 EDGEWOOD COURT

11b. City, State & Zip Code

JACKSONVILLE FL 32205

11c. Registration/Document Number

153528

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

Estuary Corporation  
by: G.P. Bishop, Jr., Secretary  
G.P. Bishop, Jr.

DATE

11-30-95

Typed or Printed Name of General Partner Signing Form

Telephone Number

904-783-5314