# B95000000184

ROBINSON, BRADSHAW & HINSON, P.A.

ATTORNEYS AT LAW

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SOUTH CAROLINA OFFICE
THE GUARDIAN BUILDING
ONE LAW PLACE - SUITE 600
P.O. DRAWER 12070
ROCK HILL, S.C. 29731
TELEPHONE (803) 325-2900
FAX (803) 325-2929

April 25, 1995

### VIA PEDERAL EXPRESS

Florida Department of State 409 East Gaines Street The Capital Room 2002 Post Office Box 6327 Tallahassee, Florida 32301-8047

Attention: Limited Partnership Division

FILED

1995 MAY 25 AM 9: 34

SECRETABLE TO S

Re: Faison-Bonita Bay Plaza Limited Partnership and FCD-Bonita Bay Plaza Limited Partnership

Dear Sir/Madam:

W95000009180

Please find enclosed herein the following documents for filing with your office:

- 1. Two (2) originals of the Certificate of Limited Partnership with two (2) originals of the Affidavit of Capital Contributions of the Limited Partners of Faison-Bonita Bay Plaza Limited Partnership attached thereto.
- 2. Two (2) originals of the Application by Foreign Limited Partnership for Authorization to Transact Business in Florida with two (2) originals of the Affidavit of Capital Contributions of the Limited Partners of FCD-Bonita Bay Plaza Limited Partnership attached thereto.

Also enclosed please find our firm's check in the amount of \$105.00 to cover the filing fee for same. Please file these documents and return copies to us showing filing information in the enclosed, self-addressed, stamped envelope.

Please contact the undersigned should you have any questions.

FF \$ 52.50 RA \$ 35.00

Sincerely,

ROBINSON, BRADSHAW & HINSON, P.A.

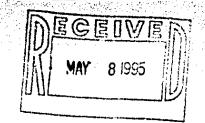
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William T. Graves

700001500737 -05/30/95--01003--014 \*\*\*\*\*87.50 \*\*\*\*\*87.50

WTG/wm Enclosures 1685, 532(4), 6718





#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

May 1, 1995

WILLIAM T. GRAVES, ESQUIRE 101 NORTH TRYON ST. 1900 INDEPENDENCE CENTER CHARLOTTE, NC 28246

- should be "FCD- Bonita -- --

SUBJECT: FCI BONITA BAY PLAZA LIMITED PARTNERSHIP

Ref. Number: W95000009180

We have received your document for FCD BONITA BAY PLAZA LIMITED PARTNERSHIP, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$87.50.

Proase complete Article(s) 4.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6920.

Ava Watson Corporate Specialist

Letter Number: 695A00020716

Will- check ordered war

B95000000184

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

- 1. The name under which the applicant was formed is FCD-Bonita Bay Plaza Limited Partnership.
- 2. The name under which the applicant proposes to transact business in the State of Florida is FCD-Bonita Bay Plaza Limited Partnership.
  - 3. The applicant was formed under the laws of the State of North Carolina.
  - March 31,
    4. The date of formation of the applicant was April \_\_, 1995.
- 5. The name of the registered agent for service of process for the applicant is John M. Joyce and his address is Suite 500, 225 E. Robinson Street, Orlando, Florida 32801.
- 6. The street address of the registered office for the applicant in the State of Florida is Suite 500, 225 E. Robinson Street, Orlando, Florida 32801.
- 7. By execution of this application, John M. Joyce hereby accepts his appointment as the registered agent for service of process for and on behalf of the applicant.

John M. Joyce B/29/95

- 8. The address of the registered office of the applicant required under the laws of the State of North Carolina is 121 West Trade Street, 1900 Interstate Tower, Charlotte, North Carolina 28202-5399 and the registered agent in North Carolina is Henry J. Faison.
- 9. The sole general partner of the applicant is Faison Capital Development, Inc., a North Carolina corporation, whose mailing address is 121 West Trade Street, 1900 Interstate Tower, Charlotte, North Carolina 28202-5399.
- 10. The address of the office at which the names, addresses and contributions of the limited partners of the applicant is as follows:

Suite 500
225 E. Robinson Street
Orlando, Florida 32801
Attention: Mr. John M. Joyce

- 11. The latest date upon which the limited partnership is to dissolve is December 31, 2051.
- 12. 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 the State of Florida is cancelled or withdrawn.
- 13. The mailing address of the limited partnership shall be 121 West Trade Street, 1900 Interstate Tower, Charlotte, North Carolina 28202-5399.

This <u>20</u> day of April, 1995.

FAISON CAPITAL DEVELOPMENT, INC., General Partner

By: James H Cucke PPER 10, Vice President

## STATE OF NORTH CAROLINA COUNTY OF MECKLENBURG

THE FOREGOING instrument			.a	.d			2-3
day of April, 1995, by James 7	was ac	Liiuwiougo	u ar	ia swom to be	rore i	me, thi	s <u>20</u>
Faison Capital Development, Inc.,	Genera	Partner	of	FCD-Ronita	, VI Rav	ICC PTC Plaza	Sident of
Partnership, a North Carolina limited	partners	hip.		·		T THE	

Ballaca J Dimencia Notary Public

State of I	North	Carolina	at	Large
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My Commission Expires: My Commission Expires May 15, 1996

[NOTARIAL SEAL]

FILED
995 NAY 25 M 9: 31
SLUNCTIVE OF STATE
ALLAHASSEE, FLORID

# AFFIDAVIT OF CAPITAL CONTRIBUTIONS OF THE LIMITED PARTNERS OF FCD-BONITA BAY PLAZAFILIMITED PARTNERSHIP, A NORTH CAROLINA LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared James H. Coupe per e. S. Vice President of Faison Capital Development, Inc., a North Carolina corporation, Seneral partner of FCD-Bonita Bay Plaza Limited Partnership, a North Carolina limited partnership (hereinafter referred to as the "Partnership"), who certifies as follows:

- 1. The amount of capital contributions of the limited partners of the Partnership is One Hundred Dollars (\$100.00).
- 2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is One Hundred Dollars (\$100.00).

This \_20 day of April, 1995.

#### FURTHER AFFIANT SAYETH NOT.

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

FAISON CAPITAL DEVELOPMENT, INC., a Norin Carolina corporation, General Partner of FCD-Bonita Bay Plaza Limited Partnership

By:

Vice Presiden

### STATE OF NORTH CAROLINA COUNTY OF MECKLENBURG

April <u>الأن</u> , 1995

and to take acknowledgements in and for the State and County set forth above, personally appeared October 1 (Colorado 1) (

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

Melinia & Directice

State of North Carolina at Large

My Commission Expires: My Commission Expires May 15, 1930

[NOTARIAL SEAL]

FILED
1995 MAY 25 AH 9:

### FILE DIT ON DEFONE DECEMBER 31, 1865 DIT ALAMERSA WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT



FLIDHIDA ULPARTLEINT OF STATE Sendra Morphum

Secretary of State DIVISION OF CORPORATIONS

To Plante of Limited Pertnership

DOCUMENT # B9500000184

FILED 95 NOV 28 1H ID: 00

FCO-BONITA BAY PLA	ZA LIMITED PARTN	000000184 Framp 96-AR	SECRETARY OF STATE TALLAHASSEE, FLORIDA
Moling Address 121 MEST TRACE ST. 180 ATERSTATE TOMER CHARLOTTE NC 2002-5300	Principal Office Ad C/O JONE M. JOY 225 E. ROBINSON ORLANDO FL 2000	DE \$ (,, \$775, mm)	DO NOT WRITE IN THIS SPACE  2. New Mailing Address. If Applicable  Suite. Apr e. etc. A Hm.: Legal Dept.  City. State & 2-1
if above addresses are incorre. In any way, lin.  3. Dute Formed or Registers J to Do Business PLOMOR US/25/1905  58. Capital Contribution			24. New Principal Office Address, if Aprilicable  Suite, April #, etc  Crty, State & Zip
Se. Capital Contributions as Shown on Record  S 100.00  S. FEES: 1.) Filing Fee: Computed at a rate 2.) Supplemental Fee: \$138.75 (p. THE AMOUNT DUE SHALL BE NO LESS THAN: If the amount entered in 5b is grade MAKE CHECK PAYABLE TO FLORIDA DEPT OF	D. Amount of Capital Contributions in FLORIDA to date 1 of \$7 per \$1,000 on amount entered in E urraunt to section 807,193, F.S.) 519: 75 (\$25 0 + \$139,75) AND NO. 66	56-194140	Applied Fox 7. CERTIFICATE OF STATUS REQUIRE Not Applicable Not Applicable of US2.50 and a maximum of \$437.50

THE AMOUNT DUE SHALL BE NO LESS THAN \$19.1.75 (\$52.50 + \$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.

Name and Address Current Registered Agent      Name and Address Current Registered Agent	r6 26 (\$437.50 + \$138.76) must be submitted along with a separate and appropriate filing fre
JOYCE, JOHN M 225 E. ROBINSON ST.	10. If changed, we frichished Apont/Office
SUITE 500 OPLANDO FL 32801	Street Address (P.O. Box Number Is Not Acceptable)
10a. Pursuant to the provisions of sections 620 1051 and 620 192 Florida Stritutes, the above-named agent. Lan force:	

Pursuant to the provisions of sections 620 1051 and 620 192. Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits thu statement agent. I am familiar with, and accept the obligations of section 620 192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

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

1. Name(s) of General Partner(s)  FASON CAPITAL DEVELOPMENT,	Address of Each General Partner (Do NOT Use Post Office But Numbers)	11b. City, State & Zip Code	
DEVELOPMENT,	121 WEST TIMOE ST.	CHAPLOTTE NC 20202	Pag Paggo 164
		400 -11/29 *****1	90164854 /\$501054022 3.25 ****191.25

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

12.	It to hereby contribution that the charged on this form: an agreed	
	Corporations from any learning applied with this filing is voluntarily furnished.	M A gament
	It to 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 Statish annual report is true and accurate and that my signature shall have the same legal effects as 3 made under oath. I further certify that I fam a General Partner of the	o a guneral partner.
	empowered to execute this report as required the charge shall have the same legal offects as 1 mormation supplied is deemed exempt from public access. Little 1.0 more supplied to the charge of the c	JAN Frelease the Division of
	The Constant Day of the Constant Day	ally hat the information indicated on
SIG	this annual report is true and accurate and that my signature shall have the same legal effects as 3 made under oath. I further centry that I rin a General Partner of the SNATURE.	mited L'arthership, receiver or truste

SIG	NAT	URE
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Typed or Printed Name of General Partner Signing Form Elizabeth M. Sp. W. Astr. Lendons Telephone Number 204 331-2600