


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED PARTNERSHIP REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED NOV -5 PM 12:17	
DOCUMENT # B9600000360 1. Name of Limited Partnership CHARTER CLUB G.P., L.P.		SECRETARY OF STATE TALLAHASSEE, FLORIDA REINSTATEMENT 2001			
2. Principal Office Address 200 EXECUTIVE WAY Suite, Apt. #, etc. SUITE 210 City & State PONTE VEDRA BCH, FL		3. Mailing Office Address 200 EXECUTIVE WAY Suite, Apt. #, etc. SUITE 210 City & State PONTE VEDRA BCH, FL		4. Date Formed or Registered To Do Business in Florida 9/18/96	
Zip 32082		Country USA		5. FEI Number 75-2669194 Applied For <input type="checkbox"/> Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status					
7a. Capital Contributions as shown on Record: 1000.00					
7b. Amount of Capital Contributions in FLORIDA to date: SAME					
8. Name and Address of Current Registered Agent Name CURT FENELON Street Address (P.O. Box Number is Not Acceptable) 200 EXECUTIVE WAY Suite, Apt. #, Etc. SUITE 210 City PONTE VEDRA BCH					
		State FL		Zip Code 32082	
9. 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 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 620.112, Florida Statutes. SIGNATURE (Registered Agent Accepting Appointment) <i>Curt Fenelon</i> DATE 10/22/01					
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.					
10. Name(s) of General Partner(s) CHARTER, G.P., L.L.C.		Address of Each General Partner (DO NOT Use Post Office Box Numbers) 200 EXECUTIVE WAY, # 210		City, State and Zip Code PONTE VEDRA BCH FL. 32082	
				10a. Registration Document Number M9600000355 400004689244--D -11/20/01--01047--007 ***641.25 ***641.25	
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.					
11. 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)(i), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(i) 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 <i>Curt Fenelon</i>		CHARTER, G.P., L.L.C.		DATE 10/22/01	
Typed or Printed Name of General Partner Signing Form CURT FENELON		Telephone Number 904-280-2235			

CR2003 (6/00)