LIMITED
PARTNERSHIP
REINSTATEMENT

Typed or Printed Name of General Partner Signing Form



FLORIDA DEPARTMENT OF STATE

FILED

PARTNERSHIP REINSTATEMENT	Secretary of State DIVISION OF CORPORATIONS	04 AUG -9 PM		MJH
DOCUMENT # B 97000 1. Name of Limited Partnership SPEER MOBILE HOME	PARK LIMITED PARTNERSH	SEE4 DALY 87 TALLAHASSEE F1 100400: 08/09/0401009	Lamen	-
			8	9
2. Principal Office Address C,R, 2555 MONTCLAIRE	3. Mailing Office Address 3000 TOWN CENTER		2/08/1997	
Suite, Apt. #, etc.	Suite, Apt. #, etc. SUITE 540	5. FEI Number 65 - 0793898	Applied For Not Applica	ble
City & State WESTON FL	SOUTHFIELD, MI	CERTIFICATE OF STATUS DESIRED	for a Certificate of Stati	
zip Country . 33327 USA	Zip 48075 Country U.S.A.	7a. Capital Contributions as shown of \$66,500.0 7b. Amount of Capital Contributions	0	
8. Name and Address of	Current Registered Agent	\$ 66,500,00		f
Name DAVID GROSS Street Address (P.O. Box Number is Not Acceptable) 2555 MONTCLAIR Sulte, Apt. #, Etc. City WESTON	E C'R, State Zip Code FL 33327	1.) Filing Fee(s): Computed at a rate of in 7b, with a minimum filing fee of \$5 for each year due this office. 2.) Supplemental Fee(s): \$88.75 for each with 1992 calendar year. 3.) Penalty Fee(s): \$500 penalty fee for Note: If the amount entered in 7b is 7a, a supplemental affidavit must be and appropriate filing fee.	\$7 per \$1,000 on amount enterer 2.50 and a maximum of \$437.50 th year due this office, beginning each year report form is defingue greater than amount entered in	ent.
9. Pursuant to the provisions of sections 620.1051 and 620. for the purpose of changing its registered office or registragent. I am familiar with, and accept the obligations of se SIGNATURE (Registered Agent Accepting Appointment) A GENERAL PARTNER THAT IS		08/09/0401009 	-011 **2052.50	CR2E039 (10/02)
MUST	BE REGISTERED AND ACTIVE	WITH THIS OFFICE.		
10. Name(s) of General Partner(s)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	City, State and Zip Code	10a. Registration Document Number	
DAVID GROSS	2555 MONTELAIREGR		-	
RONALD WEISS	3000 TOWN CENTER SO SWITE 540	STATEMENT	2002 - 2003 -	j
Notes Consultation MAY NOT				
Note: General partners MAY NOT	71	****		r
I do hereby certify that the information supplied with the Corporations from any liability follon-compliance with on this annual reports trut, and accurate and that my trustee empowered to every the report as required to SIGNATURE		a doowed anomat from public pages 1 feetber.	mandifications along the formance in a transfer and a	‡ >r

Kanald Weiss

_ Telephone Numbe 248-353-454