SIGNATURE \_

Typed or Printed Name of General Partner Signing Form

PL المنافق	EASE READ A	RE CO	OMPLETING THIS FOI FILED	₹M.				
LIMITED PARTNERSHIF REINSTATEMEN	4T	Secretar DIVISION OF C	ne Harris y of State corporations	ΤE	02 FEB 26 AM 9: 0 SECRETARY OF STATTALLAHASSEE, FLOR	E		
DOCUMENT # B9800000183								
1. Name of Limited Partnership  RES Partners, L.P.								
RES Pa	rtners, L	., P.						_
2. Principal Office Address		3. Mailing Office Address			4. Date Formed or Registered To Do Business in Florida	3-21	- 90	
-III-DE-25th Ave		JIII_NE_Q5 th Ave			5. FEI Number	י איי	Applied For	
Suite, Apt. #, etc.  Swite #	දුම	Suite # 201			22-357057	do	Not Applicable	
City & State		City & State			6. CERTIFICATE OF STATUS DESIRED		iditional Fee required ertificate of Status	
Ocala, FL		Ocala FL			7a. Capital Contributions as shown on Record: 3, 848, 000, 00			
<sup>Zip</sup> 34470	ountry	34470	Country	ŀ				
8. Name and Address of Current Registered Agent					7b. Amount of Capital Contributions in	PLONIDA (C	date.	
Name Haines, Tim D.  Street Address (P.O. Box Number is Not Acceptable)  125 DE FIVST AVE.					FEES:  1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 7b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office.  2.) Supplemental Fee(s): \$88.75 for each year due this office, beginning			
Suite, Apt. #, Etc. //					with 1992 calendar year.  3.) Penalty Fee(s): \$500 penalty fee for <u>each year report form</u> is <u>delinquent</u> .			
City Ocala		State FL			Note: If the amount entered in 7b is greater than amount entered in 7a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.			
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 620.192, Florida Statutes.  SIGNATURE (Registered Agent Accepting Appointment)								CR2E039 (9/01)
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 Gener	al Partner(s)		h General Partner Office Box Numbers)		City, State and Zip Code	10a.	Registration Document Number -	<u> </u>
R.E.S. Gene	eral, L.P.	1111 NE 3 # 201 Ocula, F	15th Ave. L 34470			B9801	00000182	
			i.		0000051 -02/26 ***10	321: /020 52.50	910 1073012 ***1052.5	1:
						· · · · · · · · · · · · · · · · · · ·		
Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.  11. ido 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)(0). Florida Statutes. I release the Division of								
Corporations from any list on this annual report is to	ability of non-compliance with rue and accurate and that my	Cookion 110 07/21/i) in the our	ent that the information supp e legal effects as if made ur	YNDON IS ALC	ion stated in Section 119.07(3)(i), Florida Sta semed exempt from public access, I further o I further certify that I am a General Partner o	empround the	INIUMBIUM INURAIEU	

Ernest Theurer

Telephone Number 352-351-9511

## RES Partners, L.P.

January 24, 2002

Dear Sir or Madam:

Enclosed is an application to reinstate RES Partners, L.P. that was inadvertently dissolved due to non-filing of the annual report. I am requesting that the penalty fees be waived due to the fact; we never received the annual report. I am enclosing my check for \$1052.20, which should bring us current through 2002.

Sincerely,

Lori A. Wacek Comptroller

dir.

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