

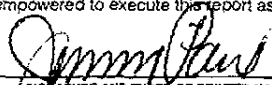


FILED
Apr 27, 2005 08:00 AM
Secretary of State

DOCUMENT # B98000000312				Apr 27, 2005 08:00 AM	
1. Entity Name CALI-COVINGTON ESTATES LIMITED PARTNERSHIP				Secretary of State	
					
Principal Place of Business ATTN: TAX DEPT. 2701 CAMBRIDGE CT., STE. 300 AUBURN HILLS, MI 48326		Mailing Address ATTN: TAX DEPT. 2701 CAMBRIDGE CT., STE. 300 AUBURN HILLS, MI 48326			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01062005 Chg-LP CR2E003 (10/03)	
City & State		City & State		4. FEI Number 38-3411116	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LEE, RICHARD P ESQ KUTZ, KUTTER, HAIGLER 106 E. COLLEGE AVE., #1200 TALLAHASSEE, FL 32301				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>					
9. Capital Contributions as Shown on record. \$300.00		10. Amount of Capital Contributions in FLORIDA to date. \$300.			
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.					
12. GENERAL PARTNER INFORMATION				13. ADDRESS CHANGES ONLY	
DOCUMENT #	F98000002845			STREET ADDRESS	
NAME	CALI CORP. - COVINGTON ESTATES				
STREET ADDRESS	2701 CAMBRIDGE CT., STE. 300			CITY ST ZIP	
CITY ST ZIP	AUBURN HILLS, MI 48326				
DOCUMENT #				STREET ADDRESS	
NAME					
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NAME					
STREET ADDRESS				CITY ST ZIP	
CITY ST ZIP					
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes					
SIGNATURE:  Jimmy Paul				1/6/05 248-340-9953	