## REVOCATION AND SESS PENALTY FEE

Typed or Printed Name of General Partner Signing Form

FLORIDA DEPARTMENT OF STATE LIMITED PARTNERSHIP Sandra <u>B</u>∴Mo∉tham ANNUAL REPORT Socretary of State 1998 DIVISION OF CORPORATIONS 98 DEC 31 PM 1:19 **DOCUMENT #** 1. Name of Limited Partnership 19800000061 1 TALLAHASSEE, FLORIDA Bauwonidge Polo Glen Limited Parmership Principal Office Address 2170 Polo Cardeno 5a. Capital Contributions as Shown on record. 3. Date Formed of Registered Al 70 Polo Gardens Dr. 10/20/98 #204 5,500,000 #20f 3a. Date of Last Report Willington FC 33418 Wellington, FC **5b.** Amount of Capital Contributions in FLORIDA to date: 4. State or Country of Formation 2. Mailing Address 2a. Principal Office Address 5, 396,9W Delaure Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 65-0868918 Not Applicable City & State City & State \$8.75 Additional Fee Required 7. Certificate of Status Desired Zip Country Country 8. Make check payable to: Dept. of State (See reverse side for fee information) 10. If changed, new Registered Agent/Office 9. Name and Address of Current Registered Agent Name Richard Schechter 2170 Pdo Gardens Dr # 204 Street Address (P.O. Box Number Is Not Acceptable) Suite, Apt. #, etc. Wellington, FC Zip Code 10a. Pursuant to the provisions of sections 620.1051 and 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) A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE 11a. Address of Each General Partner (Do NOT Use Post Office Box Numbers) 11c. Registration/ Document Number Name(s) of General Partner(s) Wellington, PC 33414 Bainbridge Plantatich A98000002370 2170 Pdo Gardeno GP LTD m # 204 200002748942 -01/20/99--01115--\*\*\*\*526, 25 \*\*\*\*526,25 Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner. 12. 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)(k), Florida Statutes, I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) 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 narmership, receiver or trueton. gal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee enter 620. Morida Statutes SIGNATURE /