

# 2000 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT # A99000002239**

1. Entity Name

**THE CHEROKEE RANCH OF N.F. LIMITED PARTNERSHIP**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 AUG 25 PM 4:02

Principal Place of Business

3027 ANDOVER ROAD  
PENSACOLA FL 32504

Mailing Address

3027 ANDOVER ROAD  
PENSACOLA FL 32504

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3616428

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

**PIERCE, ROBERT A  
227 SOUTH CALHOUN STREET  
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.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. Capital Contributions  
as Shown on record.

\$3,597,239.25

10. Amount of Capital Contributions  
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION

**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 # **GP9900001460**  
NAME **CHEROKEE RANCH PARTNERSHIP**  
STREET ADDRESS **3027 ANDOVER ROAD**  
CITY-ST-ZIP **PENSACOLA FL 32504**

STREET ADDRESS

CITY-ST-ZIP

100003384311--0

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NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS

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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)(i), 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:

*Alberta L. Shumpert*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Alberta L. Shumpert 8-21-00  
Date Daytime Phone #

850-477-8879

CR2E003 (5/00)

A99000002239 (2)

THE CHEROKEE RANCH OF N.F. LIMITED PARTNERSHIP  
3027 Andover Road  
Pensacola, Florida 32504

July 29, 2000

Florida Department of State  
Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, Florida 32314

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 AUG 25 PM 4: 02

Dear Sir/Madame:

Enclosed are the 2000 Uniform Business Report forms for The Cherokee Ranch of N.F. Limited Partnership and the Cherokee Ranch Partnership, LLP. Also enclosed are our checks in the amount of \$526.25 and \$25.00, respectively, for filing these reports.

I have not included the late filing fee penalty in either case and understand you will accept these filings, since we did not receive the initial UBR for the limited partnership and never received a UBR for the limited liability partnership. I confirmed with staff in your office that under these circumstances these reports will be accepted with the original filing fee amounts.

I appreciate your assistance. If you have any questions or need further information to process these UBRs, please contact me at (850) 477-8879.

Sincerely,



Alberta L. Shumpert,  
General Partner of  
Cherokee Ranch Partnership

:dmw  
Enclosures