

**LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT**

A00000000958

DOCUMENT # A00000000958

1. Entity Name

QUALITY HOUSING PARTNERS
NO. 16 LP

FILED

02 AUG -2 PM 1:53

DO NOT WRITE IN THIS SPACE

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business
600 Cleveland Street

3. Mailing Address
600 Cleveland Street

DO NOT WRITE IN THIS SPACE

Suite, Apt. #, etc.
Suite 460

Suite, Apt. #, etc.
Suite 460

DUE BY MAY 1

City & State
Clearwater, FL

City & State
Clearwater, FL

4. FEI Number
593656714

Applied For
Not Applicable

Zip
33755

Country
USA

Zip
33755

Country
USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Elise K. Winters, P.A.

Street Address (P.O. Box Number is Not Acceptable)
600 Cleveland Street

Suite 940

City
Clearwater

FL

Zip Code
33755

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

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions
as Shown on record. \$2,856,020.00

10. Amount of Capital Contributions
in FLORIDA to date. \$2,284,800.00

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

DOCUMENT # P00000055621
NAME Quality Housing Partners
STREET ADDRESS No. 16 General Corp.
CITY-ST-ZIP 600 Cleveland St., Ste 460
Clearwater, FL 33755

STREET ADDRESS
CITY-ST-ZIP
600006950846
-08/07/02--01064--005
*****837.50 *****837.50

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP
600006950846
-08/07/02--01064--006
*****88.75 *****88.75

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STREET ADDRESS
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:

Gary Reynolds, Secy. of General Partner

(727) 449-8788

Date

Daytime Phone

CR2E003B (12/01)

STAPLE CHECK HERE