

**2005 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2005**

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

**DOCUMENT # A10052**

1. Entity Name  
**CLEARWATER ASSOCIATES, LIMITED PARTNERSHIP**



Principal Place of Business  
**1000 N. KEENE ROAD**  
**CLEARWATER, FL 34615**

Mailing Address  
**POST OFFICE BOX 799**  
**ALBANY, NY 12201**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03212005

Chg-LP

CR2E003 (10/03)

4. FEI Number

**14-1622382**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**UCCELLINI, CHARLES L**  
**205 LENNOX ROAD W.**  
**PALM HARBOR, FL 34683**

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

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

DATE

9. Capital Contributions  
 as Shown on record.

**\$302,475.00**

10. Amount of Capital Contributions  
 in FLORIDA to date.

**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 #

NAME

STREET ADDRESS

CITY - ST - ZIP

**UCCELLINI, WALTER F.**  
**THE CROSSWAY**  
**TROY, NY 12180**

STREET ADDRESS

CITY - ST - ZIP

DOCUMENT #

NAME

STREET ADDRESS

CITY - ST - ZIP

**KEARNS, GARRY J.**  
**5 MARATHON DR.**  
**TROY, NY 12180**

STREET ADDRESS

CITY - ST - ZIP

DOCUMENT #

NAME

STREET ADDRESS

CITY - ST - ZIP

**ADLEY, HARRY C.**  
**113 BIG PASS LANE**  
**SARASOTA, FL 33581**

STREET ADDRESS

CITY - ST - ZIP

DOCUMENT #

NAME

STREET ADDRESS

CITY - ST - ZIP

**F9300004752**  
**WALTER UCCELLINI/UNITED GROUP OF COMPANIES**  
**80 STATE STREET, 8TH FLOOR**  
**ALBANY, NY 12207**

STREET ADDRESS

CITY - ST - ZIP

DOCUMENT #

NAME

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

DOCUMENT #

NAME

STREET ADDRESS

CITY - ST - ZIP

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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE

**3/21/05 518-434-2801**