APPKUYI AND FILED

2/12/02

(941) 263-7700 Daytime Phone #

## 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

A9300000566

1. Entity Nam	е							014	10.00	)
QUAIL II LIMITED PARTNERSHIP							02 APR 15 PM 12: 22			
								SECRETARY OF TAULAHASSEE.	STATE	ī
3033 RIVIERA DRIVE SUITE 201				Mailing Address 3033 RIVIERA DRIVE SUITE 201				TAULAHASSEE	L FOUR	, r
NAPLES FL 34103 NAPLES FL 34103										
Principal Place of Business     3. Mailing Address								1010 10104 11111 48111 40111 00111 00	<b>    </b>	) <b>1</b> 1110 <b>1</b> 1110 <b>1</b> 1111 <b>1111</b> 1
Suite, Apt.	#, etc.		Suite	Suite, Apt. #, etc.			DUE BY MAY 1, 2002			
City & State			City &	City & State			4. FEI Number	59-2805973	F	Applied For Not Applicable
Zip	Country		Zip	Zip Coun		try	5. Certificate of Status Desired See Required \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent					<del>-</del>	Name	7. Name and Address of New Registered Agent			
BUDD, DAVID G						Street Address (P.O. Box Number is Not Acceptable)				
3033 RIVIERA DRIVE, SUITE 201						54 5517 164 155				
NAPLES FL 34103						City	Zip Code			
8 The above	named entit	y submits this statement	for the purpo	se of changing its	register	ed office or reaist	ered agent, or both			
GI WIS GESTS	named entit				· - <b>g</b> ·		<b>.</b>			
SIGNATURE.	Signature, typed	or printed name of registered age	nt and title if appli	cable.				DAT		*****
9. Capital Contributions as Shown on record.  \$20.00  10. Amount of Capital Contributions in FLORIDA to date.								11. MAKE CHECK PAYA SEE REVERSE SIDE	FOR FEE	
_	A ( NOTE	GENERAL PARTNER : General Partners N	THAT IS A	BUSINESS EN e changed on the	TITY M	IUST BE REGI i; an amendm	STERED AND A ent must be filed	CTIVE WITH THIS OFF I to change a general	ICE. partner.	
12.		GENERAL PARTN	ER INFORMA	ATION	13.			ADDRESS CHANGES	ONLY	
DOCUMENT # NAME	MANCHESTER INVESTMENTS, INC			STF		ET ADORESS				
STREET ADDRESS CITY-ST-ZIP	3033 RIVI Naples	iera drive, suite 20 Fl 34103	)1	CIT		-ST-ZIP	4000053088247			
DOCUMENT /	P920000				STRE	ET ADDRESS	**************************************	-04/19/02	01069	028
NAME STREET ADDRESS		n of Naples, Inc. Iera drive, suite 20 El 34103	)1			-ST-ZIP	****141.25 ****141.25			
CITY-ST-ZIP  →DOCUMENT # —	P9200000	08311	<del></del>	<u> </u>	STRE	ET ADDRESS			-	
NAME STREET ADDRESS	3033 RIV	f Naples, Inc. Iera Drive, Suite 20	)1			-ST-ZIP		·		
CITY-ST-ZIP DOCUMENT #	NAPLES	FL 34103		<del></del>	-		. ,,	<u> </u>		
NAME STREET ADDRESS					STRE	EET ADDRESS				
CITY-ST-ZIP					CITY	-ST-ZIP				
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STREET ADDRESS CITY-ST-ZIP					CITY	-ST-ZIP				· · · · · · · · · · · · · · · · · · ·
14. I hereby of indicated the received	ver or trustee	e information supplied wort is true and accurate and empowered to execute MANCHESTER IN	this report as	required by Chap	ter 620,	Florida Statutes		, Florida Statutes. I further that I am a General Partne	certify that r of the lim	the information lited partnership or