

A95000001418

LAW OFFICE OF
PAUL H. WAGGONER, P.A.

PAUL H. WAGGONER
ADMITTED TO THE BAR IN FLORIDA

400 PINE ISLAND ROAD
SUITE D
BOKELIA, FLORIDA 32303

(941)
TELEPHONE 283 1070
FAX 283 3651

September 8, 1995

Secretary of State
Attention: Corporate Division
State Capital
PO Box 6327
Tallahassee, FL 32303

Re: WHISPERING BAY, LIMITED

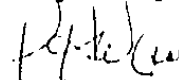
Gentlemen/Madam:

We are enclosing herewith the original Certificate of Limited Partnership, Acceptance of Appointment as Registered Agent, and Affidavit of Contributions for the above-named Limited Partnership. Our check in the amount of \$434.00 is also enclosed representing a \$399.00 filing fee and \$35.00 Registered Agent Designation fee.

Please send acknowledgement to this office.

Thank you for your assistance and cooperation.

Very truly yours,


Paul H. Waggoner

PHW:sk

Enc.

A95000001849H

Name	
Availability	fwm
Document	
Examiner	KWM
Up to	KWM
Up to	
Verifier	KWM
Acknowled	PHW
W. P. Ver	KWM

700001582757
-09/12/95--01083--001
****434.00 ****434.00

9211

PAUL H. WAGGONER
ONE SOUTH GASSERIN WASHINGTON

LAW OFFICE OF
PAUL H. WAGGONER, P.A.

500 PINE ISLAND ROAD
SUITE D
BOKEELIA, FLORIDA 32222

(941)
TELEPHONE: (941) 283-1070
FAX: (941) 283-1553

September 20, 1995
UPS Overnight #0312 237 740 7

Mr. Kenny Manning
Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

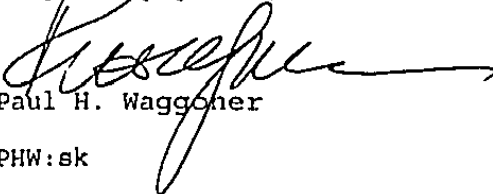
Re: WHISPERING BAY, LIMITED
W95000018491

Dear Mr. Manning:

Enclosed herewith please find the original Certificate of Limited Partnership, Affidavit of Capital Contributions and Acceptance of Appointment as Registered Agent, as well as a copy of your letter dated September 14, 1995.

We would appreciate receipt of a confirmation letter at your early convenience.

Very truly yours,


Paul H. Waggoner

PHW:sk

Enc.



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

September 14, 1995

PAUL H. WAGGONER
5400 PINE ISLAND ROAD, STE. D
BOKEELIA, FL 33922

SUBJECT: WHISPERING BAY LIMITED
Ref. Number: W95000018491

We have received your document for WHISPERING BAY LIMITED and your check(s) totaling \$434.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 620.108, Florida Statutes, requires the certificate include the names and street addresses of the general partners.

Section 620.114, Florida Statutes, requires the original certificate of limited partnership, an affidavit, a certificate of cancellation, or supplemental affidavit to be signed by all of the general partners.

I'm unable to connect Julius Tidwell as a officer of the general partner.(see attachment),

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6967.

Kenny Manning
Corporate Specialist

Letter Number: 195A00042265

10521 P. 00

CERTIFICATE OF LIMITED PARTNERSHIP OF
WHISPERING BAY, LIMITED
A FLORIDA LIMITED PARTNERSHIP

The undersigned general partner desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Law as set forth in Section 620.108 of the Florida Statutes, hereby state the following:

1. The name of the Partnership is WHISPERING BAY, LIMITED.
2. The address of the office of the Partnership is 13690 Waterfront Drive, PO Box 506, Pineland, FL 33945.
3. The name and address of the registered agent for service of process on the Partnership are Julius I. Tidwell, 13690 Waterfront Drive, PO Box 506, Pineland, FL 33945.
4. The name and business addresses of the general partner are as follows:

TIDWELL PROPERTIES, INC., a Florida corporation, 13690 Waterfront Drive, PO Box 506, Pineland, FL 33945.
5. The mailing address of the Partnership is PO Box 506, Pineland, FL 33945.
6. The latest date upon which the Partnership shall dissolve is January 1, 2015.
7. The name of the sole general partner is TIDWELL PROPERTIES, INC., a Florida corporation, and the street address is 13690 Waterfront Drive, Pineland, FL 33945. -653389

The execution of this certificate by the undersigned general partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

IN WITNESS WHEREOF, this certificate of Limited Partnership has been executed by the general partner of WHISPERING BAY, LIMITED, this 20th day of September, 1995.

Signature of all General Partners:

TIDWELL PROPERTIES, INC.,
a Florida corporation



Ted Tidwell,
President

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned constituting all of the general partners of WHISPERING BAY, LIMITED, a Florida Limited Partnership, certify as follows:

The amount of capital contributions to date of the limited partners is \$57,000.00.

The total amount contributed and anticipated to be contributed by the limited partners at this time totals \$57,000.00.

DATED this 20th day of September, 1995.

FURTHER AFFIANT SAYETH NOT.

Under the penalties of perjury I have read the foregoing and that the facts alleged are true to the best of my knowledge and belief.

TIDWELL PROPERTIES, INC.,
a Florida corporation

By: 


Ted Tidwell, President

General Partner

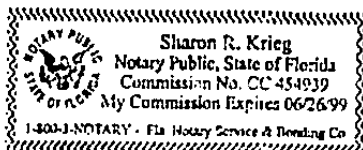
STATE OF FLORIDA
COUNTY OF LEE

The foregoing instrument was acknowledged before me this 20th day of September, 1995, by Julius I. Tidwell, President of TIDWELL PROPERTIES, INC, a Florida corporation, as General Partner of WHISPERING BAY, LIMITED, who personally appeared before me at the time of notarization, and xx who is personally known to me or who has produced _____ as identification.

My commission expires:


Notary Public

Sharon R. Krieg
Printed Name



ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT

Having been named as registered agent for WHISPERING BAY, LIMITED, a Florida limited partnership (the "Partnership") in the foregoing Certificate of Limited Partnership, I, on behalf of the Partnership, hereby agree to accept service of process for the Partnership and to comply with any and all statutes relative to the complete and proper performance of the duties of registered agent, including Florida Statute 620.192.

REGISTERED AGENT


A handwritten signature in dark ink, appearing to read "Julius I. Tidwell", is written over a horizontal line.

Julius I. Tidwell

FILE ON OR BEFORE DECEMBER 31, 1995 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Tandra Matheson
Secretary of State
Division of Corporations

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 JAN -5 AM 7:32

1. Name of Partnership

1n. DOCUMENT #
A95000001418

WHISPERING BAY, LIMITED

Deposit with: *with*

2. New Mailing Address of Applicant

Mailing Address

Post Office Address

PO Box 506
PINELAND FL 33945

Name: App # 101

City: State & Zip

2n. New Principal

500001687476

01/11/96-01/01-024

Name: App # 101

****191.25 ****191.25

Business Address (if different from Mailing Address) (Do not put the business address and telephone number in the space for Mailing Address)

3. Date of Report (Month/Day/Year)
FLORIDA
09-21-95

3n. Date of Report

4. State of Incorporation
FLORIDA

5a. Capital Contributions (if any) of the Partner

NONE

5b. Amount of Capital Contributions (if any) of the Partner

NONE

6. FEES

App # 101
Date of Report

7. CERTIFICATE OF STATUS REQUIRED ☐

\$0.75 Arbitration Fee required
for a Certificate of Status

8. FEES: 1) Filing Fee: Computed at a rate of \$7 per \$1,000 on amount entered in 5b or 5a if blank with a minimum filing fee of \$52.50 and a maximum of \$437.50.
2) Supplemental Fee: \$138.75 (pursuant to section 607.193 F.S.)
THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$138.75) AND NO MORE THAN \$576.25 (\$437.50 + \$138.75).
Note: If the amount entered in 5a is greater than amount entered in 5b, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE

9. Name and Address of Current Registered Agent

10. If changed, new Registered Agent Office

TED TIDWELL
PO Box 506
PINELAND FL 33945

Name

Street Address (P.O. Box Number is Not Accepted)

Name: App # 101

City

FL Zip Code

10a. Pursuant to the provisions of sections 620.1051 and 620.102, Florida Statutes, the above named limited partnership organized or registered under the laws of the State of Florida, submits this statement 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 620.102, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) *[Signature]* Registered Agent DATE Dec 26, 1995

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name(s) of General Partner(s)

11a. Address of Each General Partner (Do Not Use Post Office Box Numbers)

11b. City, State & Zip Code

11c. Registered Document Number

TIDWELL PROPERTIES, INC. 13690 WATER-
FRONT DR

PINELAND FL 33945

653389

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and that I am fully responsible for the exemption stated in Section 194.01(2)(b), Florida Statutes, to release the tax status of the partnership from public access pursuant to Section 194.01(2)(b), Florida Statutes, in the event that the information supplied is deemed exempt from public access. I further certify that the information supplied on this report is true and accurate and that its signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership or its sole or trustee or authorized to execute this report as required by Chapter 607, Florida Statutes.

SIGNATURE *[Signature]* DATE Dec 26, 1995
Telephone Number 941-283-2994

CR2E003 (6/95)