

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A95000001596**

1. Entity Name

THE FAIRWAYS OF QUAIL HOLLOW, LTD.

FILED

00 MAY -2 PM 4: 20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

6641 GENTLE BEN CIRCLE
WESLEY CHAPEL FL 33543

Mailing Address

6641 GENTLE BEN CIRCLE
WESLEY CHAPEL FL 33544-3437

2. Principal Place of Business

6000 Gentle Ben Cir
Suite, Apt. #, etc.

3. Mailing Address

6000 Gentle Ben Cir
Suite, Apt. #, etc.

City & State

Wesley Chapel FL
Zip 33544 Country USA

City & State

Wesley Chapel, FL
Zip 33544 Country USA

4. FEI Number

59-3370914

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

O'MALLEY, ANDREW M
100 SOUTH ASHLEY DRIVE, SUITE 1190
TAMPA FL 33602

7. Name and Address of New Registered Agent

Name: CINDY MEYER
Street Address (P.O. Box Number is Not Acceptable): 6000 Gentle Ben Circle
City: Wesley Chapel FL Zip Code: 33544

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

Cindy Meyer, President
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

4/14/2000
DATE

9. Capital Contributions
as Shown on record.

\$720,000.00

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

DOCUMENT # P95000056754
NAME CHAPEL DEVELOPMENT, INC.
STREET ADDRESS 5339 VILLAGE MARKET
CITY - ST - ZIP WESLEY CHAPEL FL 33543

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13. ADDRESS CHANGES ONLY

STREET ADDRESS
CITY - ST - ZIP 600003287596--9
-03/14/00--01003--006
****532.00 ****532.00

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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: *Cindy Meyer, President*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/14/2000 (813) 973-1318
Date Daytime Phone #