

2002 UNIFORM BUSINESS REPORT (UBR)

1 of 2

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DOCUMENT # A96000001240
 1. Entity Name
APALACHEE ENTERPRISES, LTD.

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

02 AUG 13 AM 10:46

W 8/14

Principal Place of Business: 625 E. TENNESSEE, STE 200, TALLAHASSEE FL 32308
 Mailing Address: 212 HOFFMAN DR., TALLAHASSEE FL 32312



2. Principal Place of Business: Suite, Apt. #, etc.
 3. Mailing Address: Suite, Apt. #, etc.
 City & State: _____
 Zip: _____ Country: _____

DUE BY SEPTEMBER 25, 2002
 4. FEI Number: **59-3392233**
 Applied For: Not Applicable
 5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
OWEN WILDE, JUDITH
212 HOFFMAN DR
TALLAHASSEE FL 32312

7. Name and Address of New Registered Agent
 Name: _____
 Street Address (P.O. Box Number is Not Acceptable): _____
 City: _____ State: **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: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record: **\$24,000.00**
 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 #	OWEN, WILLIAM C
NAME	2803 RABBIT HILL ROAD
STREET ADDRESS	TALLAHASSEE FL 32312
CITY-ST-ZIP	
DOCUMENT #	WILDE, JUDITH O
NAME	212 HOFFMAN DRIVE
STREET ADDRESS	TALLAHASSEE FL 32312
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	500007139875--9
CITY-ST-ZIP	-08/15/02--01046--012
	****256.75 ****256.75
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

CR2E003 (4/02)

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: *Judith O. Wilde* **WILDE** 8/9/02 487-4733
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

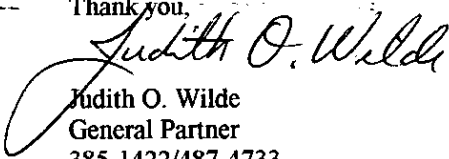
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August 8, 2002

Division of Corporations:

Enclosed please find the 2002 Uniform Business Report and Fee payment of \$256.75 for Apalachee Enterprises Limited. This report was received in mid-July at the mailing address listed on Hoffman Dr. It indicated that it was a second mailing and a late fee of \$400.00 was due by September 25, 2002. Per conversation with your office, this letter affirms that this was the first and **only** report received by Apalachee Enterprises for the 2002 year. In recent years the report was due in May, but prior to that the filing was December, so I was not concerned when it did not arrive. I thought that the filing dates might have changed again. Your office indicated that the late fee would be waived upon receipt of this statement.

Thank you,



Judith O. Wilde
General Partner
385-1422/487-4733

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