

A98000000994

SWF Development Limited Partnership
Requestor's Name

6100 mid metro Drive, Suite 7
Address

Fort Myers, FL 33912
City/State/Zip Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____ (Corporation Name) (Document #)
2. _____ (Corporation Name) (Document #)
3. _____ (Corporation Name) (Document #)
4. _____ (Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

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NEW FILINGS	
☐	Profit
☐	NonProfit
☐	Limited Liability
☐	Domestication
☐	Other

AMENDMENTS	
☐	Amendment
☐	Resignation of R.A., Officer/ Director
☐	Change of Registered Agent
☐	Dissolution/Withdrawal
☐	Merger

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****105.00 ****105.00

Name	_____
Address	_____
OTHER FILINGS	
☐	Annual Report DCC
☐	Fictitious Name
☐	Name Reservation
Verifier	C
Acknowledgement	DCC
W. P. Verifier	DCC

REGISTRATION/ QUALIFICATION	
☐	Foreign
☐	Limited Partnership
☐	Reinstatement
☐	Trademark
☐	Other

Supplemental
affidavit
increasing contribution
to \$150,000.00

G. TAX _____
FILING _____
R. AGENT FEE _____
C. COPY _____

Examiner's Initials	_____
BALANCE DUE	_____
REFUND	_____

**SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A
FLORIDA LIMITED PARTNERSHIP**

The undersigned general partners of SWF Development Limited Partnership

_____, a

Florida Limited Partnership, executed this supplemental affidavit filed pursuant to section 620.112,
Florida Statutes.

The total amount of the capital contributions of the limited partners is: \$ 150,000.

This 12 day of February, 19 2001.

FURTHER AFFIANT SAYETH NOT.

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

General Partner(s)

Pete Proff, Pres.
Crown Colony Management, Inc

Fees:

\$7 per \$1000, based on additional
contributions

Minimum \$ 52.50

Maximum \$1750.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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