

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A98000001282**

1. Entity Name

QUIETWATER LIMITED PARTNERSHIP

APPROVAL
AND
FILED

02 MAY 22 PM 12:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

1101 GULF BREEZE PARKWAY, BOX 64
PENSACOLA FL 32501

Mailing Address

1101 GULF BREEZE PARKWAY, BOX 64
PENSACOLA FL 32501



2. Principal Place of Business

1101 Gulf Breeze Pkwy

3. Mailing Address

1101 Gulf Breeze Pkwy Ste 200

Suite, Apt. #, etc.

Suite 200

Suite, Apt. #, etc.

Suite 200

DUE BY MAY 1, 2002

City & State

Gulf Breeze, FL

City & State

Gulf Breeze, FL

4. FEI Number

59-3512026

Applied For

Not Applicable

Zip

32561

Country

USA

Zip

32561

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CHASE, JAMES L

101 EAST GOVERNMENT STREET

PENSACOLA FL 32501

7. Name and Address of New Registered Agent

Name

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

City

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions
as Shown on record.

\$4,201,141.47

10. Amount of Capital Contributions
in FLORIDA to date.

\$3,598,291.57

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 # **P97000102341**
NAME **QUIETWATER CAPITAL MANAGEMENT, INC.**
STREET ADDRESS **1101 GULF BREEZE PARKWAY, BOX 64**
CITY-ST-ZIP **PENSACOLA FL 32501**

13. ADDRESS CHANGES ONLY

STREET ADDRESS

1101 Gulf Breeze Pkwy Ste 200

CITY-ST-ZIP

Gulf Breeze, FL 32561

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STREET ADDRESS

CITY-ST-ZIP

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 AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

5/14/02

Date

Daytime Phone #

0007186 AT

CR2E003 (9/01)