

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A99000001417**

1. Entity Name

QUANTUM CAPITAL PARTNERS II, LTD.

FILED

00 JAN 28 PM 1:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

ONE TAMPA CITY CENTER
201 NORTH FRANKLIN STREET, SUITE 2650
TAMPA FL 33602

Mailing Address

ONE TAMPA CITY CENTER
201 NORTH FRANKLIN STREET, SUITE 2650
TAMPA FL 33602-5182



2. Principal Place of Business

339 SOUTH PLANT AVENUE

Suite, Apt. #, etc.

3. Mailing Address

339 SOUTH PLANT AVENUE

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

TAMPA FL

City & State

TAMPA FL

4. FEI Number

Applied For

Not Applicable

Zip

33606

Country

USA

Zip

33606

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

~~SCHIFINO, WILLIAM J~~
~~ONE TAMPA CITY CENTER~~
~~201 NORTH FRANKLIN STREET, SUITE 2650~~
~~TAMPA FL 33602~~

7. Name and Address of New Registered Agent

Name **N. JOHN SIMMONS, JR.**

Street Address (P.O. Box Number is Not Acceptable)
339 SOUTH PLANT AVENUE

City **TAMPA**

FL Zip Code **33606**

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

N. John Simmons, Jr.

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

(NOTE: Registered Agent signature required when reinstating)

1-21-00

DATE

9. Capital Contributions as Shown on record.

\$2,500,000.00

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 #	P98000015470
NAME	QUANTUM CAPITAL PARTNERS, INC.
STREET ADDRESS	201 NORTH FRANKLIN STREET, SUITE 2650
CITY - ST - ZIP	TAMPA FL 33602
DOCUMENT #	
NAME	
STREET ADDRESS	
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	339 SOUTH PLANT AVENUE
CITY - ST - ZIP	TAMPA FL 33606
STREET ADDRESS	
CITY - ST - ZIP	
STREET ADDRESS	
CITY - ST - ZIP	
STREET ADDRESS	
CITY - ST - ZIP	
STREET ADDRESS	
CITY - ST - ZIP	

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******526.25 ****526.25**

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:

N. John Simmons, Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
QUANTUM CAPITAL PARTNERS, INC.

1-21-00

813-250-7999

Daytime Phone #

x227