

FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT  
TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

97 DEC 22 PM 1:46

1. Name of Limited Partnership

1a. DOCUMENT #  
B97000000174

WAVERLY DEVELOPMENT GROUP, L.P.



12/31

Mailing Address

C/O ROBERT M. SCHIFFMAN  
1430 WYNNTON ROAD  
COLUMBUS GA 31906

Principal Office Address

C/O ROBERT M. SCHIFFMAN  
1430 WYNNTON ROAD  
COLUMBUS GA 31906

3. Date Formed or Registered

04/11/1997

5a. Capital Contributions as  
Shown on record.

\$1,900,000.00

3a. Date of Last Report

5b. Amount of Capital  
Contributions in FLORIDA  
to date:

4. State or Country of Formation

GA

2. Mailing Address

Suite, Apt. #, etc.

2a. Principal Office Address

Suite, Apt. #, etc.

City & State

Columbus GA

City & State

Columbus GA

Zip

31906

Country

USA

Zip

31906

Country

USA

6. FEI Number

58-2347789

☐ Applied For  
☐ Not Applicable

7. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

8. Make check payable to: Dept. of State (See reverse side for fee information)

9. Name and Address of Current Registered Agent

NRAI SERVICES, INC.  
526 E. PARK AVE.  
TALLAHASSEE FL 32301

10. If changed, new Registered Agent/Office

Name

STANLEY A. TARKOW

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

511 Bay Street, Suite 410

Suite, Apt. #, etc.

City

Tampa

FL

Zip Code

33606

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE 12/19/97

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY  
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name(s) of General Partner(s)

W DEVELOPMENT GROUP, LLC

11a. Address of Each General Partner  
(Do NOT Use Post Office Box Numbers)

1430 WYNNTON ROAD

11b. City, State & Zip Code

COLUMBUS GA 31906

11c. Registration/  
Document Number

M97000000180

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-01/06/98--01084--022  
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Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

DATE 12/13/97

Typed or Printed Name of General Partner Signing Form

WILLIAM DAWAHARE

Daytime Telephone Number

706-322-2914

CR2E003 (6/97)