2002 UNIFORM BUSINESS	REPORT	(UBR
		<b>\</b> /

DOCUMENT # A97000600237  1. Entity Name					FILED			2	
SGI LIM	NITED PARTNER	ISHIP					02 APR 12 PM 1	: 09	
Principal Place of Business Mailing Address 3110 CAPITAL CIRCLE, N.E. 3110 CAPITAL CIRCLE, N.E. TALLAHASSEE FL 32308 TALLAHASSEE FL 32308					SECRETARY OF ST TALLAHASSEE, FLO	TATE RIDA			
0.00	·								
	Place of Business		3. Mailing Address		<del>-</del>			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Suite, Apt. #, etc. Suite, Apt. #, etc.				, de	DUE BY MAY 1, 2	002			
City & State City & State					4. FEI Numbe	59-3426224	Applied For Not Applicable		
Zip	Country Zip		Cour	ntry	5. Certificate of Status Desired \$8.75			_=	
6. Name and Address of Current Registered Agent			<del></del>	Nama	7. Name and	Address of New Registered	Agent		
PHIPPS VENTURES, INC. 3110 CAPITAL CIRCLE, N.E. TALLAHASSEE FL 32308			Name  Street Address (P.O. Box Number is Not Acceptable)						
					City		FI	Zip Code	
8. The above	named entity su	omits this statement for	the purpose of changing it	s register	ed office or registe	ered agent, or bot	h, in the State of Florida.		
SIGNATURE .	Signature, typed or pri	nteenament redistried agent a	nd title if applicable.				DATE		
9. Capital Co as Shown	ntributions	11,906,931,79	10. Amount of Capi		butions	31,79	11. MAKE CHECK PAYABL	E TO DEPT. OF STATE	
	A GEN NOTE: Ge	ERAL PARTNER T	HAT IS A BUSINESS E	NTITY M	IUST BE REGIS	TERED AND A	CTIVE WITH THIS OFFIC d to change a general pa	E.	
12.		GENERAL PARTNER		13.			ADDRESS CHANGES ON	JLY	
DOCUMENT # NAME	P9600054527 PHIPPS VENTURES, INC.		STRI	EET ADDRESS				(9/01	
STREET ADDRESS CITY-ST-ZIP	3110 CAPITA   TALLAHASSE	L CIRCLE, N.E. E FL 32308		CITY	-ST-ZIP	ЭC	00005273	5428	CR2E003 (9/01)
DOCUMENT #				STRE	EET ADDRESS	<u> </u>	-04/16/020	1005024	CR2
NAME STREET ADDRESS CITY-ST-ZIP	. <u>.</u> =				-ST-ZIP		****CC(0.C3	*****320.23	~ ·-
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			this filing does not qualify for hat my signature shall have report as required by Char	the same oter 620, I	e legal effect as if i Florida Statutes ,	nade under oath; AKTNOK	), Florida Statutes. I further cet that I am a General Partner of	tify that the information fithe limited partnership or	
SIGNATURE: BY SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER  Date  (Dayling Phone #									