

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # ~~LLP 99-0000350~~ A99000001648

1. Entity Name

CKM Investments Limited, LLP

FILED

01 MAY 29 AM 9:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

10103 9th Street North

10103 9th Street North

Suite A

Suite A

St. Petersburg, FL 33716

St. Petersburg, FL 33716

2. Principal Place of Business

3. Mailing Address

4200 4th Street North

4200 4th Street North

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite D

Suite D

City & State

City & State

St. Petersburg, FL

St. Petersburg, FL

Zip

Zip

33703

Country

Pinellas

Country

Pinellas

4. FEI Number

59-3602159

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

1000

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Michael E. Barger

10103 9th Street North

Suite A

St. Petersburg, FL 33716

Name

Michael E. Barger

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

4200 4th Street North

Suite D

City

St. Petersburg

FL

Zip Code

33703

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

4-4-01

DATE

9. Capital Contributions

as Shown on record. \$600,000

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

13. ADDRESS CHANGES ONLY

DOCUMENT #

NAME
Barger, Michael E.
STREET ADDRESS
10103 9th Street North
CITY-ST-ZIP
St. Petersburg, FL 33703

STREET ADDRESS

4200 4th Street North, Suite D

CITY-ST-ZIP

St. Petersburg, FL 33703

DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Michael E. Barger

Date

Daytime Phone #

4-4-01

727-520-7711

CR2E003 (11/00)