

2001 UNIFORM BUSINESS REPORT (UBR)

0013151 AF

DOCUMENT # A00000001026

1. Entity Name

GILGER INVESTMENTS, LTD.

Principal Place of Business

800 S.E. MONTEREY COMMONS BLVD., SUITE 200
STUART FL 34996

Mailing Address

800 S.E. MONTEREY COMMONS BLVD., SUITE 200
STUART FL 34996

FILED

01 APR 27 PM 3:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1042741

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HIGGINS, JAMES S

800 S.E. MONTEREY COMMONS BLVD., SUITE 200
STUART FL 34996

7. Name and Address of New Registered Agent

Name

Kenneth A. Norman

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

800 S.E. Monterey Commons Blvd., Ste 200

City

Stuart

FL

Zip Code
34996

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$4,962,500.00

10. Amount of Capital Contributions
in FLORIDA to date.

4,962,500

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 this form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT # P00000081762
NAME GILGER MANAGEMENT, INC.
STREET ADDRESS 800 S.E. MONTEREY COMMONS BLVD., SUITE 200
CITY-ST-ZIP STUART FL 34996

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13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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

Robert C. GARRETSON 4/26/01

Date

Daytime Phone #

CR2E003 (11/00)

Tel. No. (908) 689 1055