| DOCUMENT # A0100001559  1. Entity Name  GLEN PLANTATION, LTD.   |  |                          |                     |                        |   | FILED 02 APR 16 AM II: 34  |       |
|---|--|--------------------------|---------------------|------------------------|---|--|-------|
|   |  |                          |                     |                        |   |  |       |
| Principal Place of Business     Address     Address   |  |                          |                     | <del></del>            |   |  |       |
| Suite, Apt. #, etc.   |  |                          | Suite, Apt. #, etc. |                        |   | DUE BY MAY 1, 2002   |       |
| City & State  |  |                          | City & State        |                        |   | 4. FEI Number Applied (59–3759509 Net Appl   |       |
| Zip   |  |                          | Zip                 | Country                |   | 5. Certificate of Status Desired   | -     |
|   | 6. Name and  | Address of Current Regis | tered Agent         |                        | -   | 7. Name and Address of New Registered Agent  |       |
| CURTIS, JOHN M<br>11635 N.W. 1ST AVENUE<br>GAINESVILLE FL 32607   |  |                          |                     |                        | Name Street Address (P.O. Box Number is Not Acceptable) |  |       |
|   |  |                          |                     |                        | City  | FL Zip Code  |       |
| SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.  9. Capital Contributions as Shown on record.  \$194,000.00  10. Amount of Capital in FLORIDA to date. |  |                          |                     | ite.                   |   | DATE  11. MAKE CHECK PAYABLE TO DEPT. OF STAT  SEE REVERSE SIDE FOR FEE INFORMATIO     | TE IN |
|   | 11012. 001   | erai Faithers MAT NO     | i be changed on the | TITY MUS<br>le form; a | T BE REGIS<br>In amendme                                | SISTERED AND ACTIVE WITH THIS OFFICE.  ment must be filed to change a general partner. |       |
| GENERAL PARTNER INFORMAT  |  |                          | RMATION             | 13.                    |   | ADDRESS CHANGES ONLY   |       |
| DOCUMENT # NAME STREET ADDRESS  | ADDRESS T-ZIP GLEN PLANTATION, INC. 11635 N.W. 1ST AVENUE GAINESVILLE FL 32607 |                          |                     | STREET A               | DDRESS  |  |       |
| CITY-ST-ZIP   |  |                          |                     | CITY-ST-               | -ZIP <b>BR</b> .  |  |       |
| DOCUMENT # NAME STREET ADDRESS  |  |                          |                     | STREET AL              | DDRESS  |  |       |
| CITY-ST-ZIP  DOCUMENT #   | <u> </u>   |                          |                     | CITY-ST-               | ZIP   |  |       |
| NAME<br>STREET ADDRESS  | <u>}</u>   |                          |                     | STREET AD              | DORESS  | -04/26/0201007018  |       |
| City-St-Zip<br>Document #   |  |                          | <u>.</u>            | CITY-ST-Z              | ZIP   | ****535.00 ****535.00  |       |
| NAME<br>STREET ADDRESS  |  |                          |                     | STREET AD              |   | · · · · · · · · · · · · · · · · · · ·  |       |
| DOCUMENT #  | <del></del>  |                          |                     | CITY-ST-Z              |   |  |       |
| NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   |  |                          |                     | STREET AD              |   |  |       |
| DOCUMENT #  | <u> </u>   |                          |                     |                        |   |  |       |

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

CITY-ST-ZIP

STREET ADDRESS

SIGNATURE

STREET ADDRESS

CITY-ST-ZIP

John M. Curtis 4/3/02

President

352-332-0838