2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

Apr 09, 2004 08:00 AM Secretary of State DOCUMENT # A30977 Entity Name HILL INVESTMENTS, LTD. Principal Place of Business 6010 POINTE WEST BOULEVARD Mailing Address 6010 POINTE WEST BOULEVARD BRADENTON FL 34209 **BRADENTON FL 34209** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc DUE BY MAY 1, 2003 City & State City & State 4. FEI Number 65-0237766 Applied For Not Applicable Ζıρ Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HILL, GEOFFREY W. Street Address (PO, Box Number is Not Acceptable) 6010 POINTE WEST BOULEVARD **BRADENTON FL 34209** City Zip Code 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. I am familiar with, and accept the obligations of registere SIGNATURE Signature Typed or printed name of registered and 9. Capital Contributions 10. Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE \$2,001,960.00 as Shown on record. in FLORIDA to date 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 ADDRESS CHANGES ONLY DOCUMENT # STREET ADDRESS HILL, GEOFFREY W. NAME 6010 POINTE W BLVD STREET ADDRESS CITY-ST-ZIP U00000114978 BRADENTON FL CITY-ST-ZIP 04/16/04-80005-022-526-25 DOCUMENT # STREET ACORESS STREET ADDRESS City-SI-789 CHY-SI-ZP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS GIEY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CIEV. ST. 782 CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BOCHMENT # STREET ADDRESS NAME STREET ADDRESS Car-SI-ZIP CITY-ST-ZIP

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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 SIGNANG GENERAL PARTNER

FILED