

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A93000000717

1. Entity Name

GHA VICTORIA, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 APR 28 AM 3:05

Principal Place of Business
2121 GRAND HARBOR BLVD.
VERO BEACH FL 32967

Mailing Address
2121 GRAND HARBOR BLVD.
VERO BEACH FL 32967-7216



2. Principal Place of Business

3.

Suite, Apt. #, etc.

3755 7th Terrace
Suite 301

City & State

Vero Beach, FL 32960

Zip

Country

Zip

Country

4. FEI Number

59-3212249

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~D'HAESSELEER, RONALD V~~
2121 GRAND HARBOR BLVD.
VERO BEACH FL 32967

Name PETER J. HENN

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

2121 GRAND HARBOR BLVD

City

VERO BEACH

FL

Zip Code 32967

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

PETER J. HENN

4/20/00

9. Capital Contributions
as Shown on record.

\$20,000.00

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 # P96000004739
NAME GHA DEVELOPMENT, INC.
STREET ADDRESS 2121 GRAND HARBOR BLVD.
CITY - ST - ZIP VERO BEACH FL 32967

STREET ADDRESS

CITY - ST - ZIP

100003271271-2
-05/31/00--01014--022
****237.50 ****237.50

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

DOCUMENT #
NAME
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)(l), 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:

PETER J. HENN

4/20/00 561-778-0180

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

PETER J. HENN