200 ⁻	1 UNI	FORM BUS	INESS REPO	RT	(UB	R)					-
DOCUMENT # A9400001366							,	Q.			
TROPHY HUNTER INVESTMENTS, LTD.								ILED			
Principal Place of Business Mailing Address							2001 APR	19 AM 10:	21		
777 S. HARBOUR ISLAND BLVDSUITE 270 P.O. BOX 418 TAMPA FL 33602 TAMPA FL 33601							DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA				
2. Principal Place of Business 3. Mailing Address											
Suite, Apt. #, etc. Suite, Apt. #, etc.								DO NOT WR	ITE IN THIS	SPACE	
City & Stat	e		City & State				4. FEI Number	59-3264604		-	Applied For Not Applicable
Zip		Country	Zip	Country			5. Certificate o	f Status Desired	X		5 Additional equired
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent Name						
VAN DYKE, STEVEN A C/O TOWER INVESTMENT GROUP, INC.E 270 777 S. HARBOUR ISLAND BLVD., STE. 270						ddress (F	(P.O. Box Number is Not Acceptable)				
TAMPA FL 33602					City	Dity .			FL	Zip	Code
	named entity	submits this statement f	or the purpose of changing its re	egistere	ed office or	r registere	ed agent, or both,	in the State of Fl	orida.		
SIGNATURE .	Signature, typed	or printed name of registered agent	and title if applicable. (NOTE: F	Registered	Agent signat	ure required v	when reinstating)		DATE		
9. Capital Contributions as Shown on record. \$73,515,469.00 10. Amount of Capital Contributions in FLORIDA to date.						8,300	9,204.26	11. MAKE CHE SEE REVER	•		PT. OF STATE INFORMATION
	A (NOTE:	General Partners Ma	THAT IS A BUSINESS ENTI AY NOT be changed on the	form:	UST BE I	REGIST ndment	ERED AND AC must be filed	to change a g	eneral par	tner.	
12. GENERAL PARTNER INFORMATION					ADDRESS CHA				IANGES ON	LY	
P9400066450 NAME TROPHY HUNTER, INC. STREET ADDRESS 777 S. HAPPOUR ISLAND BLVD. STE 270					ET ADDRESS						
STREET ADDRESS 777 S. HARBOUR ISLAND BLVD., STE 270 TAMPA FL 33602				CITY-	·ST-ZIP					-7-' -1	
DOCUMENT # NAME					ET ADDRESS				9/01(9/05(185:00	1063	-15
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NAME ADDRESS	4 - 5-3	energy (magnetic property)	The second of th	.STREI	e <u>t</u> address_			-			\mathcal{F}_{i}
STREET ADORESS CITY-ST-ZIP				CITY-	-ST-ZIP			=	· -		·'

12. DOCU NAME STREET CITY-DOCU NAME STREE CITY-DOCU NAME STREE CITY-DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP, 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: