

2002 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

02 MAR 27 AM 10:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **A95000000470**

1. Entity Name

GLEN LAKE INVESTORS, LTD.

Principal Place of Business

**7826 COOPER ROAD
CINCINNATI OH 45242**

Mailing Address

**7826 COOPER ROAD
CINCINNATI OH 45242**



2. Principal Place of Business

Grove at Lakeland Square

Suite, Apt. #, etc.
3570 U.S. Hwy 98 N.

City & State
Lakeland Florida

Zip Country
33809 U.S.A.

3. Mailing Address

Grove at Lakeland Square

Suite, Apt. #, etc.
3570 U.S. Hwy 98 N.

City & State
Lakeland Florida

Zip Country
33809 U.S.A.

DUE BY MAY 1, 2002

4. FEI Number

59-3309923

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

~~MCGRATH, GREGORY K
4561 GULF OF MEXICO DRIVE
#101
LONGBOAT KEY FL 34228~~

7. Name and Address of New Registered Agent

Name
Barclay Realty Services Group, Inc.
Street Address P.O. Box Number (Not Acceptable)
Grove at Lakeland Square
3570 U.S. Hwy 98 N.
City
Lakeland FL Zip Code
33809

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 *Mark J Wilson, VP* *Mark L Wilson, VP*

DATE
3/15/02

9. Capital Contributions
as Shown on record.

\$99.00

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

DOCUMENT # **P95000019928**
NAME **BARON CAPITAL V, INC.**
STREET ADDRESS **7826 COOPER ROAD**
CITY-ST-ZIP **CINCINNATI OH 45242**

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

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-04/03/02--01070--015
******150.00 ****150.00**

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: *Mark L Wilson, VP* *Mark L Wilson, VP* *3/15/02* *513 936 3408*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (9/01)

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