## 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

A97000000736

1. Entity Name

BARON STRATEGIC INVESTMENT FUND IX, LTD.

Principal Place of Business

\*\* GREGORY K. MOGRATH

7826 COOPER-RD.

Mailing Address

% GREGORY K. MCGRATH

7826 COOPER RD.

APPROVE AND FILED

02 MAR 27 PM 12: 10

SECRETARY OF STATE TAULAHASSEE, FLORIDA



FIDETINUETT CH- 49545			CINCINNATI CHI 45242			
2. Principal Place of Business  Avore at Lakeland Savare Grove at				Keland Say	Jaxe	-
Suite, Apt. #, etc. 3510 U.S. Hwy 98 N. 3510 U.S. Hwy					•	DUE BY MAY 1, 2002
City & Stat	te ,	Florida	City & State	erocida		4. FEI Number 31-1547437 Applied For Not Applied For
Zip	<del>(V)</del>	Country	Zip	Country		5. Certificate of Status Desired \$8.75 Additional
<i>37</i> 809	6. Name	and Address of Current	ろろ80~ Registered Agent	U.Š.A.		7. Name and Address of New Registered Agent
MCGRATI 4561 GUL LONGBO	/ <del>00 DR: #101</del>		Bame Cay Realty Services Group, Inc.  Street Appress (P. Q. Box Numberlis Not Asceptable)  2570 U.S. Hwy 98 N.  City Land FL Zigzgge 09			
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 Fiorida.						
SIGNATURE Mark L. Wilson, VP MARK L. Wilson, VP 3/15/02 Signature, typed or printed hame of registered agent and title if applicable.						
9. Capital Co as Shown		\$99.00	10. Amount of Capita in FLORIDA to da			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		13.		ADDRESS CHANGES ONLY
DOCUMENT # NAME STREET ADDRESS		3443 Apital LXII, INC. Per Road		STREET ADDRESS		
CITY-ST-ZIP		TI OH 45242		CITY-ST-ZIP		
DOCUMENT <b>#</b> NAME				STREET ADORESS		
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DOCUMENT # NAME				STREET ADDRESS	•	
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

SON, WAIF MARK L WISON VP 3/15/02 513 936 3 408