2005 LIMITED PARTNERSHIP ANNUAL REPORT

Principal Place of Business

2. Principal Place of Business

TAMPA, FL 33602

Suite, Apt. #, etc.

City & State

JAEB, JOHN R

TAMPA, FL 33602

9. Capital Contributions

12.

NAME STREET ADDRESS

NAME STREET ADDRESS

MAME STREET ADDRESS

DOCUMENT#

CITY-ST-ZIP

BOCUMENT &

GITY-ST-ZIP DOCUMENT #

CFY-ST-ZP DOCUMENT#

STREET ADDRESS

CITY-ST-ZIP OOCUMENT#

CITY-ST-ZIP DOCUMENT #

SIGNATURE:

SIGNATURE AND TYPED OR PRITED NAME OF SIGN

HAME STREET ADDRESS

NAME STREET ADDRESS CITY-ST-ZIP

as Shown on record.

Zip

FILED **Due By May 1, 2005** Jan 25, 2005 08:00 AM DOCUMENT # A97000001404 **Secretary of State** 1. Entity Name GLH HOLDINGS, LTD. Mailing Address 100 W. KENNEDY BLVD., #740 100 W. KENNEDY BLVD., #740 TAMPA, FL 33602 3. Mailing Address Suite, Apt #, etc 01192005 Cha-LP CR2E003 (10/03) 4. FEI Number City & State Applied For 59-3458318 Not Applicable Country \$8.75 Additional Country Ζiρ 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) 100 W. KENNEDY BLVD., #740 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 Fiorida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and trile if applicable. DATE 10. Amount of Capital Contributions \$2,100,000.00 in FLORIDA to date. 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. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 13. P97000047444 STREET ADDRESS GLIT HOLDINGS, INC. 100 W. KENNEDY BLVD., #740 CITY-ST-ZIP TAMPA, FL 33602 000000196683 01/26/05-80081-801 526.25 STREET ADDRESS 0114-51-70 STREET ADDRESS CUY-SI-ZP STREET ADDRESS CITY-SI-AP STREET ADDRESS DITY-ST-ZP STREET ADDRESS

14. I hereby certify that the information supplied with this filing offes not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes 1 further certify that the information indicated on this report is true and accurate and that my signature shall have the fame 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 perpet a grequited by Chapter 620, Florida Statutes

Dayring Phone #

GENERAL PARTNER