

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A97000001953**

1. Entity Name

GUNN INVESTMENTS, LTD.

Principal Place of Business

**21 N. LOXAHATCHEE DRIVE
JUPITER FL 33458**

Mailing Address

**21 N. LOXAHATCHEE DRIVE
JUPITER FL 33458**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

**GUNN, CHARLOTTE N
4 SHELDRAKE
PALM BEACH GARDENS FL 33418**

7. Name and Address of New Registered Agent

Name	Kevin C. Gunn	Christopher S. Gunn
Street Address (P.O. Box Number is Not Acceptable)	80 Pinehill Tr. E	50 Woodland Dr.
City	Tegueste, FL 33469	Tegueste, FL 33469
State	FL	FL
Zip Code	33469	33469

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

Charlotte N. Gunn

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record

\$500.00

10. Amount of Capital Contributions
in FLORIDA to date

\$500.00

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 #
NAME **CHARLOTTE N. GUNN, TRUSTEE**
STREET ADDRESS **4 SHELDRAKE**
CITY-ST-ZIP **PALM BEACH GARDENS FL 33418**

Leave as is

DOCUMENT #
NAME ~~Kevin C. Gunn~~
STREET ADDRESS ~~80 Pinehill Tr. E~~
CITY-ST-ZIP ~~Tegueste FL 33469~~

DOCUMENT #
NAME ~~Christopher S. Gunn~~
STREET ADDRESS ~~50 Woodland Dr.~~
CITY-ST-ZIP ~~Tegueste, FL 33469~~

DOCUMENT #
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STREET ADDRESS
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DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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:

Charlotte N. Gunn
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

4/24/01

(561) 747-1215

APPROVED
AND
FILED

01 JUN 14 AM 9:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

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CR2E003 (11/00)