

2001 UNIFORM BUSINESS REPORT (UBR)

001759 AF

DOCUMENT # **A98000000108**

1. Entity Name

HGL PROPERTIES L.P., LTD.

FILED \$535.00

01 APR 25 PM 12:14

SECRETARY OF STATE



DO NOT WRITE IN THIS SPACE

Principal Place of Business 8120 NATIONS WAY, #202 JACKSONVILLE FL 32256	Mailing Address 8120 NATIONS WAY, #202 JACKSONVILLE FL 32256
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-3500487	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**HGL PROPERTIES G.P., INC.
6602 EXECUTIVE PARK COURT NORTH, SUITE 207
JACKSONVILLE FL 32216**

7. Name and Address of New Registered Agent

Name **Mark A. Reinsch**
 Street Address (P.O. Box Number is Not Acceptable) **1301 Riverplace Blvd., STE 1818**
 City **Jacksonville, FL** Zip Code **32207**

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 A. Reinsch** DATE **4/17/01**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. Capital Contributions as Shown on record. \$2,100,000.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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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		13. ADDRESS CHANGES ONLY	
DOCUMENT # P98000002697	NAME HGL PROPERTIES G.P., INC.	STREET ADDRESS	
STREET ADDRESS 8120 NATIONS WAY, #202	CITY-ST-ZIP JACKSONVILLE FL 32256	CITY-ST-ZIP	
DOCUMENT #	NAME	STREET ADDRESS	
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STREET ADDRESS	CITY-ST-ZIP	CITY-ST-ZIP	

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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: **William W. Stout, VP** DATE **4/17/01** (904) 296-3444
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Daytime Phone #

CR2E003 (11/00)