

2002 UNIFORM BUSINESS REPORT (UBR)

001841 AT

DOCUMENT # A99000000153

1. Entity Name
GLA INVESTMENT AND DEVELOPMENT, LTD.

FILED
02 APR 29 PM 4:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business: **353 WINDOW ROCK DRIVE WELLINGTON FL 33414**

Mailing Address: **353 WINDOW ROCK DRIVE WELLINGTON FL 33414**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

DUE BY MAY 1, 2002

City & State

4. FEI Number: **65-0861163**

Applied For: Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**ZIMMERMAN, GEORGE W SR.
353 WINDOW ROCK DRIVE
WELLINGTON FL 33414**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** 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 Florida.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. **\$48,000.00**

10. Amount of Capital Contributions in FLORIDA to date. **6,800.00**

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 #	P98000057886
NAME	GEORGIA LAND ACQUISITION, INC.
STREET ADDRESS	353 WINDOW ROCK DRIVE
CITY-ST-ZIP	WELLINGTON FL 33414
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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	300005502963--8
CITY-ST-ZIP	-05/10/02--01056--017 ***141.25 ***141.25
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)(j), 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: *George W. Zimmerman* **George W. Zimmerman**
Date: **4/25/02** Daytime Phone #: **561-793-6062**

CR2E003 (9/01)