

# 2000 UNIFORM BUSINESS REPORT (UBR)

0015100  
1

**DOCUMENT # B93000000512**  
 1. Entity Name  
**GLIMCHER PROPERTIES LIMITED PARTNERSHIP**

**FILED**  
 00 APR 28 PM 4: 58

Principal Place of Business: **20 SOUTH THIRD STREET COLUMBUS OH 43215**  
 Mailing Address: **20 SOUTH THIRD STREET COLUMBUS OH 43215-4206**

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA



2. Principal Place of Business: Suite, Apt. #, etc.  
 3. Mailing Address: Suite, Apt. #, etc.  
 City & State  
 Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number: **31-1390925**  
 Applied For:  Not Applicable  
 5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**C T CORPORATION SYSTEM**  
**1200 SOUTH PINE ISLAND ROAD**  
**PLANTATION FL 33324**

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. (NOTE: Registered Agent signature required when reinstating)

9. Capital Contributions as Shown on record. **5.11 Filed 4-28-00**  
**66,459,955.00**

10. Amount of Capital Contributions in FLORIDA to date. **66,459,955**

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 STREET ADDRESS CITY - ST - ZIP	<b>F93000004593</b> <b>GLIMCHER PROPERTIES CORPORATION</b> <b>20 SOUTH THIRD STREET</b> <b>COLUMBUS OH 43215</b>
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	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS CITY - ST - ZIP	
STREET ADDRESS CITY - ST - ZIP	<b>700003243747 -- 0</b> <b>-05/09/00--01013--003</b> <b>***2276.25 ****526.25</b>
STREET ADDRESS CITY - ST - ZIP	<i>OK</i>
STREET ADDRESS CITY - ST - ZIP	<b>\$526.25</b>
STREET ADDRESS CITY - ST - ZIP	
STREET ADDRESS CITY - ST - ZIP	

12. 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:** *George M. Harmanis*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER: **GEORGE M. HARMANIS - VP/CONTROLLER**  
 Date: **4/27/00** Daytime Phone #: **614-621-9000**  
**GLIMCHER PROPERTIES CORPORATION - CORP GEN. PARTNER**

CR2E003 (9/99)