## LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L02000033565

1. Entity Name

GINGEMERLE INVESTMENTS, LLC



## FILED Mar 12, 2003 8:00 am Secretary of State

03-12-2003 90013 018 \*\*\*\*50.00

	1000				2.0	100			elizar and	100	3753	1	112						2000	 3 3 5 5			200			- 1
	-		333							_		_		Section	-		370	_		_	F			S - 30		
			390	1 .		400	V. 1	ten a		2000	11			1166			. 30		147	_	3,43%	_	-		_	E
		1 18		Mi a '	u II	森田	1.0				4		_	200	8.1	м.	200			_	1.00				F 200 12	
4						. 20	16	0.00		-	- 17			1300	8 1	•	tion of				100			_	122	-
		54.7	250	N III		_	.E	3306	1 2 3	0.696	15		_	Date:			4444	1.7		 _	1.52		12.41	_		

2. Principal P	Place of Business	3. Mailing Address											
	ice Ave. West	341 Venice		st									
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	•		DO NOT WRITE IN THIS SPACE								
City & Stat	0	City & State					T						
	Florida	Venice, Flo	orida		4. FEI Number	-	Applied For						
Zip	Country	Zip	Count	n.	65-1174382	<b>*= 0</b> 0	Not Applicable						
34285	US	34285	US	. y	5. Certificate of Status Desired	Additional autred							
	0.00	134203			7. Name and Address of Current Registered Agent								
				Name									
	DO_NOT_W	RITE		<u>Robert T</u>	[. Klingbeil, Jr.								
			-	Street Address (P.O. Box Number is Not Acceptable) – 341 Venice Ave. West									
	IN THIS SP.	ACE			cc live. west								
				Venice		<u> </u>							
				City Venice	FL	Code 4285							
8. The above	named entity submits this statement for	the ourpose of chang	ina its reaistere		ed agent, or both, in the State of Florida. I am f								
' the obligati	ions of registered agent.	are purpose or charg	iing its registere	a office of register	ed agent, or both, in the state of Florida. Fam i	arıllıar v	vitri, and accept						
SIGNATURE	Signature, typed or printed name of registered agent an	d title if applicable			DATE								
	and the state of t	a tito ii applicable		CONTROL OF A CONTROL OF THE STATE	DATE								
			FEE IS										
		Make Creck P	以上的10分钟的10分钟的10分钟的10分钟的10分钟的10分钟的10分钟的10分钟	rida Departme	nt of State								
			DUE BY										
9.	MANAGING MEMBER	S/MANAGERS	Newtoning Resident	element remerciales and animalism transfer and		n er sker proce by typ 	at the or the state of the stat						
TITLE	MGR	_	TITLE										
NAME STREET ADDRESS	Robert T. Klingbeil,	Jr.	NAME										
CITY-ST-ZIP	341 Venice Ave. West	-	1886 General	T ADDRESS	outropy and a community of the state of the most state of								
	Venice, FL 34285		TERM SERVICE	ST-ZIP		4							
TITLE NAME	MGR	•	TITLE		an an tagan kanan kanan anggari dangan kanan danggari dan ka								
STREET ADDRESS	James R. Pietrzak		NAME										
CITY-ST-ZIP	5250 Hunting Hills I		的独立的问题扩充	FADDRESS									
	Roanoke, VA 24014-49	923	CITY.	SI + ZIP									
TITLE			TITLE										
NAME STREET ADDRESS			NAME										
CITY-ST-ZIP			White Court is	ADDRESS	DO NOT-WRI	TE							
		-	Alteritation	31-20P="+		man and an amenda							
TITLE			TITLE		IN THIS SPAC	E							
NAME CIRCEL ADDRESS			NAME	1		<i>)</i> L							
STREET ADDRESS CITY-ST-ZIP				ADDRESS									
— <del>-</del>			CITY-S	1-2P									
TITLE			DILE				+ 1						
NAME STREET ADDRESS			NAME										
CITY-ST-ZIP				ADDRESS									
			CITY-S	I-UP			100						
TITLE			TITLE				T. Service Control						
NAME STREET ADDRESS			NAME										
CITY-ST-7IP			STREET	ADDRESS									

11. 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 managing member or manager of the limited liability company or the receiver or mostee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: , Robert T. Klingbeil, Jr. signature and type of printed name of signing managing member, manager, or authorized representative

3/7/03 (941)485-2900