2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9900057123

1. Entity Name

GDS-MAGNOLIA PLANTATION, INC.

Principal Place of Business

Mailing Address

7232 W. SAND LAKE ROAD. SUITE 200 ORLANDO FL 32819

7232 W. SAND LAKE ROAD. SUITE 200

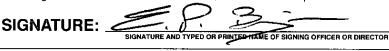
ORLANDO FL 32819

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

FILED
May 04, 2001 8:00 am
Secretary of State
05-04-2001 90062 011 ***150.00

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2. Principal Place of Business 3. Mailing Address												
Suite, Apt. #, etc. Suite, Apt. #, etc.						DO NOT WRI	TE IN THIS SF	ACE				
City & State City & State			.	4.	FEI Number	59-358754	9		plied For]		
Zip		Country	Zip	Coun	itry	5.	Certificate of :	Status Desired		8.75 Add		1
	6 Name	and Address of Current	Registered Agent		I	7. 1	Name and Ad	dress of New F			1	┨
	o. Humo	and Addiess of Garrent	riegisteles Agent		Name							
FINKBEINER, FRANK G ATTY 7232 W. SAND LAKE ROAD, SUITE 200 ORLANDO FL 32819				Street Address (P.O. Box Number is Not Acceptable)						1		
					City				FL	Zip Code)	
8. The above	named entity	submits this statement fo	r the purpose of changing its	register	ed office or	registered ag	ent, or both, i	n the State of Flo	orida.			{
SIGNATURE .												
0,0,4,7,0,12	Signature, typed	or printed name of registered agent a	and title if applicable. (NOT	E: Registere	d Agent signati	are required when re	einstating)		DATE			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! FE After MAY 1, 2001 Fe Make Check Payable to			01 Fee	will be \$5	50.00	1	on Campaign Fir Fund Contributio			May Be to Fees		
<u> </u>	na on back)	OFFICERS AND	•	12.	spartitierii		DITIONS (CH	ANGES TO OFF	ICEDS AND I	NECTORS	IN 11	┨
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NAME		EDWARD P		NAM	_	Bignon	, Marie	-				
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13. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.



Moss and Reeves, P.A.

Certified Public Accountants

Attachment P99000057123 inter 101 # 648090

480 N. Orlando Avenue, Suite 218 Winter Park, Florida 32789

a little and

Van Ward - W

7232 Sand Lake Road, Suite 101 Orlando, Florida 32819

(407) 894-5072 • Fax (407) 898-2981 • (407) 351-3568 E-Mail: cpa@mossreeves.com

INSTRUCTIONS FOR FILING FLORIDA UNIFORM BUSINESS REPORT

Ghs-M	an on lin
Plan April 1	totton, Inc. 4,2001 Pooted
Enclosed in dupl information cont instructions.	icate is your 200 Uniform Business Report. Please review the corporate ained therein. Upon your review and approval, please comply with the following filing
Signature:	Sign and date at the bottom of page 1. Also include your telephone number.
Amount due:	Please make your check payable to "Department of State" and write your EIN and "2001 UBR" on the face of your check.
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Mail to:	Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500
Due Date:	Must be mailed no later than May 1, 2001
Duplicate Copy:	Retain for your files after indicating thereon the date the original was signed and mailed.
Please call if you	have any questions.
Thank you for yo	ur business.
Sincerely,	
Certified Public A	Accountants