

T0500000/256

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

289/1740/262/671  
"Capital Management"

Office Use Only

FF \$87.50

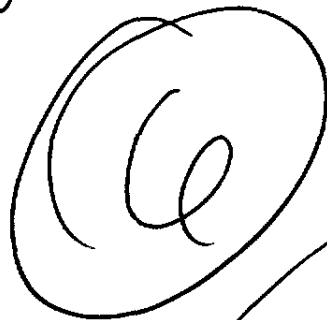


100058663131

08/31/05--01005--005 \*\*87.50

T05-1256

W05-41394



SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

05 SEP 22 PM 12:15

FILED



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

September 6, 2005

DONALD S. SHOWALTER, ESQUIRE  
ONE EAST BROWARD BLVD., SUITE 1300  
FT. LAUDERDALE, FL 33301

SUBJECT: CRUSADER CAPITAL MANAGEMENT  
Ref. Number: W05000041394

We have received your document for CRUSADER CAPITAL MANAGEMENT and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your mark contains word(s)/design(s) that must have a disclaimer. All geographical terms, such as cities, states, countries, and designs of same, must be disclaimed. Some commonly used words and corporate suffixes must also be disclaimed. You must disclaim the following term(s) by completing the disclaimer statement found in #2 of Part III of the application: "CAPITAL MANAGEMENT"

The specimens provided this office are not acceptable; we need three permanent specimens, **which may be the same or different**. We do not accept photocopies or camera ready copies. We do not accept specimens which have been altered or defaced in any manner. In order to register your service mark, we need specimens from which we can determine the services being rendered. We will accept brochures, newspaper, or magazine advertisements, or business cards. If business cards are used, we must be able to determine from the business card the services offered. The mere mark, address, city, etc., on the business card, brochure, or advertisement is not acceptable -- we must be able to look at the specimens provided and be able to determine the services being rendered. We need specimens for each class of registration. We **DO NOT** accept letterhead, stationery, envelopes, invoices or mailing labels.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6918.

Nanette Causseaux  
Document Specialist Supervisor

Letter Number: 805A00055416

**Holland+Knight**

Tel 954 525 1000  
Fax 954 463 2030

Holland & Knight LLP  
One East Broward Boulevard, Suite 1300  
Fort Lauderdale, FL 33301  
[www.hklaw.com](http://www.hklaw.com)

Donald S. Showalter  
954 468 7879  
[don.showalter@hklaw.com](mailto:don.showalter@hklaw.com)

September 19, 2005

Ms. Nanette Causseaux  
Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Re: CRUSADER CAPITAL MANAGEMENT  
Your Ref: W05000041394  
Our Ref.: 082534.3

Dear Ms. Causseaux:

In response to your letter of September 6, 2005 regarding the above referenced Florida Service Mark Application, enclosed please find three permanent specimens showing the mark as used in advertisement for the services during a client presentation.

In addition, we have completed the disclaimer statement in #2 of Part III of the application to disclaim the words "CAPITAL MANAGEMENT" as you have requested.

Please contact the undersigned if anything further is requested.

Sincerely yours,

HOLLAND & KNIGHT LLP

By: 

Donald S. Showalter for the firm

Enclosure

**APPLICATION FOR THE REGISTRATION OF A TRADEMARK OR SERVICE MARK**  
PURSUANT TO CHAPTER 495, FLORIDA STATUTES

**TO: Division of Corporations**  
Post Office Box 6327  
Tallahassee, FL 32314

Name & address to whom acknowledgment should be sent:

Donald S. Showalter, Esq.

One East Broward Blvd., Suite 1300

Fort Lauderdale, Florida 33301

( 954 ) 468-7879  
Daytime Telephone number

**PART I**

1. (a) Applicant's name: Crusader Capital Management, LLC

(b) Applicant's business address: 200 S. Orange Avenue, Suite 1875

Orlando, Florida 32801

City/State/Zip

(c) Applicant's telephone number: ( 407 ) 843-1804

- Individual       Corporation       Joint Venture       Other: limited liability  
 General Partnership       Limited Partnership       Union      company

If other than an individual,

(1) Florida registration number: L02000004440 ✓ (2) Domicile State: Florida

(3) Federal Employer Identification Number: 43-1951785

2. (a) If the mark to be registered is a service mark, the services in connection with which the mark is used:  
(i.e., furniture moving services, diaper services, house painting services, etc.)

Investment management services, namely management of investment funds.

(b) If the mark to be registered is a trademark, the goods in connection with which the mark is used:  
(i.e., ladies sportswear, cat food, barbecue grills, shoe laces, etc.)

(c) The mode or manner in which the mark is used:(i.e., labels, decals, newspaper advertisements, brochures, etc.)

Advertising for the services, namely Microsoft PowerPoint® presentations to accredited investors  
and business documents including agreements under which the services are rendered.

(Continued)

(d) The class(es) in which goods or services fall:

Int. Class 036

**PART II**

1. Date first used by the applicant, predecessor, or a related company (must include month, day and year):

(a) Date first used anywhere: May 1, 2002 (b) Date first used in Florida: May 1, 2002

**PART III**

1. The mark to be registered is: (If logo/design is included, please give brief written description of which must be 25 words or less.)

CRUSADER CAPITAL MANAGEMENT

FILED  
SEP 22 PM 12:15  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

English Translation n/a

2. DISCLAIMER (if applicable)

NO CLAIM IS MADE TO THE EXCLUSIVE RIGHT TO USE THE TERM "CAPITAL MANAGEMENT" APART FROM THE MARK AS SHOWN.

I, Joseph Muehl, being sworn, depose and say that I am the owner and the applicant herein, or that I am authorized to sign on behalf of the owner and applicant herein, and no other person except a related company has the right to use such mark in Florida either in the identical form or in such near resemblance as to be likely to deceive or confuse or to be mistaken therefor. I make this affidavit and verification on my/the applicant's behalf. I further acknowledge that I have read the application and know the contents thereof and that the facts stated herein are true and correct

Crusader Capital Management, LLC

Typed or printed name of applicant

*Joseph Muehl*

Applicant's signature or authorized person's signature

(List name and title) Joseph Muehl - Managing Director

STATE OF Florida

COUNTY OF Orange

On this 19 day of August, 2005, Joseph Muehl personally appeared before me,

who is personally known to me  whose identity I proved on the basis of \_\_\_\_\_

(Seal)

*Brooks Lee*

Notary Public Signature  
Brooks Lee



My Commission DD062782

Notary's Printed Name

Expires October 4, 2005

My Commission Expires: \_\_\_\_\_

FEE: \$87.50 per class



# Global Assets Advisors, LLC

## Crusader Capital Management

*The Enhanced MM Fund (Non-U.S.)*

*The GAA Enhanced Cash Fund (U.S.)*

*"A Liquid Strategy to Enhance Cash"*



Crusader Capital Management, LLC  
300 South Orange Avenue, Suite 1100 • Orlando, FL 32801 • (407) 254-1500 • (800) 432-0000

