2001	UNIFORM	BUSINESS	REP	ORT.	(UBR
					,

DOCUMENT # A9800000139 1. Entity Name											
FREEBEE LANDHOLDINGS, LTD.					FILED						
Principal Place of Business Mailing Address C/O LRW & JTW. INC. 6322 N.W. 18TH DRIVE GAINESVILLE FL 32653 Mailing Address C/O LRW & JTW. INC. 6322 N.W. 18TH DRIVE GAINESVILLE FL 32653							O1 JAN 25 PM 12: 46; SECRETARY OF STATE TANHAMARATINITH THE PROPERTY OF STATE				
Principal Place of Business 3. Mailing Address					,	5					
Suite, Apt. #, etc. Suite, Apt. #, etc.				• • • • • • • • • • • • • • • • • • • •		DO NOT WRITE IN THIS SPACE					
City & State C		City & State		4. FEI Number	59-3486304		Applied For Not Applicable				
Zip		Coun			Zip ,	Cour	ntry	5. Certificate of	of Status Desired		75 Additional Required
	6. Name	and Ad	dress of Current I	Regist	ered Agent	·	Name	7. Name and	Address of New Regist	ered Agent	
WATSON, LARRY R						Street Address	Street Address (P.O. Box Number is Not Acceptable)				
6322 N.W. 18TH DRIVE GAINESVILLE FL 32653											
							City	, (A.F) 2014		FL Z	p Code
8. The above	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 _	Signature, typed	or printed r	ame of registered agent a	nd title if	applicable. (NOT	E: Registere	d Agent signature requir	ed when reinstating)	τ	DATE	
9. Capital Contributions as Shown on record. \$160,000.00 10. Amount of Capital Contribution in FLORIDA to date.					butions	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION					
	A (NOTE:	GENER : Gener	AL PARTNER T	HAT I	S A BUSINESS EN T be changed on t	ITITY M	UST BE REGIS	STERED AND A	TIVE WITH THIS OF to change a genera	FICE. I partner.	
12.	DOGOGOG		ENERAL PARTNER	INFO	RMATION	13.	·	·.	ADDRESS CHANGE	SONLY	6
DOCUMENT # NAME	LRW & JTW, INC.								(11/0		
STREET ADDRESS CITY-ST-ZIP	G322 N.W. 18TH DRIVE GAINESVILLE FL 32653				CITY	-ST-ZIP				2E003 (11/00)	
DOCUMENT # NAME						STRE	EET ADDRESS				OR
STREET ADDRESS CITY-ST-ZIP						СІТҮ	-ST-ZIP				. •
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DOCUMENT # NAME						STRE	ET ADDRESS	20	-01/30/01 <u>-</u>	-01110	27 022
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DOCUMENT / NAME						STRE	EET ADDRESS		, .		
STREET ADDRESS CITY-ST-ZIP	-						-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)(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 Larry R. Watton, as President of											
SIGNATI	URE: <u></u>		SMIT				LRW	A. WEISON	Inc. 1-	11-01	
		SIGN	ATUBE AND TYPED OR F	RINTEC	NAME OF SIGNING GENER	AL PARTNE	F	<u> </u>	Date 352	-378°-	9157