2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A98000001000

1. Entity Name

MCCORMICK PROPERTIES, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 FEB 22 AM 10:21

Principal Place of Business	Mailing Address
318 SAN JUAN DRIVE PONTE VEDRA BEACH FL 32082	~~P.O. BOX 4550~~ ~~JACKSONVILLE FL 32201-4560~~ Same 318 San Juan Dr Ponte Vedra Bd

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	318 San Juan Dr FL 32082 Suite, Apt. #, etc. Ponte Vedra Beach
City & State	City & State FL
Zip / Country	Zip 32082 / Country St Johns

4. FEI Number 59-3511662 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
~~YONG, FRANK J~~ Suzanne M. Taylor 318 SAN JUAN DRIVE PONTE VEDRA BEACH FL 32082	Name: Suzanne M. Taylor Street Address (P.O. Box Number is Not Acceptable): 318 San Juan Dr City: Ponte Vedra Beach FL Zip Code: 32082

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: Suzanne M. TAYLOR Suzanne M Taylor — DATE: 2.18.2000

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.	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
$11,000,000.00		

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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	P98000023467	STREET ADDRESS	Jean H. ~~McCormick, Inc~~
NAME	JEAN H. MCCORMICK, INC. 318 San Juan Dr.		318 San Juan Dr
STREET ADDRESS	~~1050 RIVERSIDE AVENUE, P.O. BOX 4550~~	CITY-ST-ZIP	Ponte Vedra Bch FL 32082
CITY-ST-ZIP	~~JACKSONVILLE FL 32201~~ Ponte Vedra Bch FL 32082		
DOCUMENT #		STREET ADDRESS	
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CITY-ST-ZIP			

CR2E003 (9/99)

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

SIGNATURE: SIGN HERE Jean H. McCormick — 2/18/2000 — 904.280.8080

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #