


LD3000024834

LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR) *** AMENDED ***

FILED
MAY 12 AM 10:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **LD3000024834**

1. Entity Name
Orchard Park Jax, LLC



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business **315 E Las Olas Blvd** 3. Mailing Address **315 E Las Olas Blvd**

Suite, Apt. #, etc. **15th Fl** Suite, Apt. #, etc. **15th Fl**

City & State **Ft. Lauderdale FL** City & State **Ft. Lauderdale FL**

Zip **33301** Country Country

BK

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

4. FEI Number **20-0129378** Not Applicable

5. Certificate of Status Desired \$5.00 Additional Fee Required

7. Name and Address of Current Registered Agent

Name **Jason R Sessions**

Street Address (P.O. Box Number is Not Acceptable) **4320 Salisbury Rd**

Suite 239

City **Jacksonville** FL Zip Code **32256**

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. I am familiar with, and accept, the obligations of registered agent.

SIGNATURE: _____ DATE: _____

FEE IS \$50.00
Make Check Payable to: Florida Department of State
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Manager Durham Crossing Development Corp. 4320 Salisbury Rd., Ste 239 Jacksonville FL 32256	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	000036215470
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AMENDED
2004
UBR

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(b), 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 registered trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Jason R Sessions **305256 0369**

Jason R Sessions, Pres

CR2E003B (12/02)



L03000024834

CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 638317 7215498

AUTHORIZATION :

Patricia Pigute

COST LIMIT : \$ 50.00

ORDER DATE : May 11, 2004

ORDER TIME : 12:58 PM

ORDER NO. : 638317-015

CUSTOMER NO: 7215498

CUSTOMER: Jeri Poller, Esq
Jeri Poller P.a.
6013 Northwest 23rd Avenue

Boca Raton, FL 33496

Jeri

FILED
04 MAY 12 AM 10:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ANNUAL REPORT FILING

*** AMENDED ***

NAME: ORCHARD PARK JAX, LLC

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XX PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Troy Todd-EXT#2940

EXAMINER'S INITIALS: _____

RECEIVED
04 MAY 12 PM 4:54
DIVISION OF CORPORATION