

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Jun 23 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P97000064295 (3)

1. Corporation Name  
JMC COMMUNITIES VI, INC.



Principal Place of Business: 2201 4TH STREET NORTH SUITE 200 ST. PETERSBURG FL 33704  
Mailing Address: 2201 4TH STREET NORTH SUITE 200 ST. PETERSBURG FL 33704

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	Suite, Apt #, etc.	26	Suite, Apt #, etc.	07/23/1997	
22	City & State	27	City & State	4. FEI Number	
23	Zip	28	Zip	59-3459890	
24	Country	29	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
25		30		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25		30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
FORD, HARVEY A  
501 FIRST AVENUE NORTH SUITE 1000  
ST. PETERSBURG FL 33701

10. Name and Address of New Registered Agent  
81 Name: J. Michael Cheezem  
82 Street Address (P.O. Box Number is Not Acceptable): 2201-4th Street North, Ste 200  
83  
84 City: St. Petersburg FL 85 Zip Code: 33704

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *[Signature]* DATE: 5/24/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHEEZUM, J M	1.2 NAME	Cheezem, J. Michael
STREET ADDRESS	2201 4TH STREET NORTH SUITE	1.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL 33704	1.4 CITY-ST-ZIP	
TITLE		2.1 TITLE	VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	Hobach, John P.
STREET ADDRESS		2.3 STREET ADDRESS	2201-4th Street North, Ste 200
CITY-ST-ZIP		2.4 CITY-ST-ZIP	St. Pete, FL 33704
TITLE		3.1 TITLE	VP-T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	Allen, Robert L.
STREET ADDRESS		3.3 STREET ADDRESS	2201-4th St. North Ste 200
CITY-ST-ZIP		3.4 CITY-ST-ZIP	St. Pete, FL 33704
TITLE		4.1 TITLE	S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	Copeland, G. Spring
STREET ADDRESS		4.3 STREET ADDRESS	2201-4th Street North, Ste 200
CITY-ST-ZIP		4.4 CITY-ST-ZIP	St. Pete, FL 33704
TITLE		5.1 TITLE	VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	Heavell, Patty
STREET ADDRESS		5.3 STREET ADDRESS	2201-4th Street North, Ste 200
CITY-ST-ZIP		5.4 CITY-ST-ZIP	St. Pete, FL 33704
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE: 4/28/98 813 823 0000

CR2E034 (10/97)