FILED
03 JAN 16 PM 1:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED PARTNERSHIP
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A03000000006

1. Entity Name

JACARANDA TRAIL II, LTD.

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2937 SW 27 Avenue	2937 SW 27 Avenue
Suite, Apt. #, etc.: Suite 303	Suite, Apt. #, etc.: Suite 303
City & State: Coconut Grove, FL	City & State: Coconut Grove, FL
Zip: 33133 Country: USA	Zip: 33133 Country: USA

DUE BY MAY 1

4. FEI Number: Applied For ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Brian J. McDonough

Street Address (P.O. Box Number is Not Acceptable): 2200 Museum Tower

150 West Flagler Street

City: Miami FL 33130

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

Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. $99.00

10. Amount of Capital Contributions in FLORIDA to date. $99.00

11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

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

DOCUMENT #	P02000134719
NAME	Jacaranda Trail II, Inc.
STREET ADDRESS	2937 SW 27 Avenue, Ste. 303
CITY-ST-ZIP	Coconut Grove, FL 33133

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STAPLE CHECK HERE

CR2E003B (12/02)

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: Bruce Greer 1/14/03

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

ACCOUNT NO. : 072100000032

REFERENCE : 893869 4311473

AUTHORIZATION : Patricia Pizzuto

COST LIMIT : $ 150.00

ORDER DATE : January 15, 2003

ORDER TIME : 11:0 AM

ORDER NO. : 893869-010

CUSTOMER NO: 4311473

CUSTOMER: Jackie Gerstenfeld, Paralegal
Stearns Weaver Miller
Museum Tower, Suite 2200
150 West Flagler Street
Miami, FL 33130

ANNUAL REPORT FILING

NAME: JACARANDA TRAIL II, LTD.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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

CONTACT PERSON: Susie Knight-EXT#1156

EXAMINER'S INITIALS:

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

03 JAN 16 AM 11:52

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