

2002 UNIFORM BUSINESS REPORT (UBR)

0006576 AT

DOCUMENT # A95000001168

1. Entity Name

MYERS INVESTMENTS OF PONTE VEDRA, LIMITED

FILED

02 MAR 25 PM 12:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MJH

Principal Place of Business

Mailing Address

320 CORPORATE WAY, STE. 200
ORANGE PARK FL 32073

320 CORPORATE WAY, STE. 200
ORANGE PARK FL 32073

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DUE BY MAY 1, 2002

4. FEI Number

59-3331380

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

GIEBEIG, LEAH B

320 CORPORATE WAY, STE. 200
ORANGE PARK FL 32073

Name

Leah Burnette

Street Address (P.O. Box Number is Not Acceptable)

320 Corporate way

Suite 200

City

Orange Park

FL

Zip Code

32073

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

Leah Burnette

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

1-14-02

DATE

9. Capital Contributions
as Shown on record.

\$2,180,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO 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

13. ADDRESS CHANGES ONLY

DOCUMENT # P95000048595
NAME MYERS INVESTMENTS OF JACKSONVILLE, INC.
STREET ADDRESS 320 CORPORATE WAY, STE 200
CITY-ST-ZIP ORANGE PARK FL 32073

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

*Amendment
has been
filed on
3/8/02*

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

100005175441--3
-03/29/02--01005--029
*****535.00 *****535.00

DOCUMENT #
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STREET ADDRESS

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 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:

Leah Burnette

1-14-02

904-269-5852

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (9/01)

STAPLE CHECK HERE