#FLKAAF

2002 UNIFORM BUSINESS REPORT (UBR)

A96000000879 **DOCUMENT #** 02 APR -8 PM 3: 08 1. Entity Name DURBIN JACKSONVILLE HOLDINGS LIMITED PARTNERSHIP SECRETARY OF STATE TALLAHASSEE, FLORIDA Mailing Address Principal Place of Business 143 ANCHOR DRIVE 143 ANCHOR DRIVE VERO BEACH FL 32963 VERO BEACH FL 32963 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. **DUE BY MAY 1, 2002** Applied For City & State 4. FEI Number City & State 65-0684040 Not Applicable Country Zip Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name DURBIN, JAMES E Street Address (P.O. Box Number is Not Acceptable) 143 ANCHOR DRIVE **VERO BEACH FL 32963** Zip Code 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, typed or printed name of registered agent and title if applicable. 11. MAKE CHECK PAYABLE TO DEPT. OF STATE 10. Amount of Capital Contributions 9. Capital Contributions \$2,000,000.00 SEE REVERSE SIDE FOR FEE INFORMATION in FLORIDA to date. as Shown on record. 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. ADDRESS CHANGES ONLY GENERAL PARTNER INFORMATION 12. DOCUMENT # P06027 STREET ADDRESS NAME J&JD, INC. STREET ADDRESS 143 ANCHOR DRIVE CITY-ST-ZIP VERO BEACH FL 32963 CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT -80000474634668050 STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP 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

STAPLE CHECK HERE

1010, Ano. 04/01/02

CR2E003 (9/01)