## **2001 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # A9600002256  J.M. FAMILY REAL ESTATE PARTNERS, LTD.										
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Principal Plac 100 N.W. 12TH % WORLD OM DEERFIELD BE	PT.	Mailing Address PO BOX 4007 DEERFIELD BEACH FL 33	<del>"</del>		MAR -5 ECRETARY ( LLAHASSEE	AH IO: 02 OF STATE FLORIDA				
Principal Place of Business     3. Mailing Address								<b>                                    </b>		
Suite, Apt. #, etc. Suite, Apt. #, etc.							DO NOT WRIT	E IN THIS SI	PACE	
City & Stat	te		City & State	, & State			65-0712574		Applied For Not Applicable	
Zip	Zip Country		Zip	Cour	ntry	5. Certificate o	f Status Desired		8.75 Additional ee Required	
	6. Name	and Address of Current	Registered Agent		Nomo	7. Name and A	ddress of New R	egistered A	gent	
VALDES-FAULI CORPORATE SERVICES, INC. 777 SOUTH FLAGLER DRIVE, SUITE 500 EAST					Name THOMAS Street Address (	THOMAS BLANTON  Street Address (P.O. Box Number is Not Acceptable)				
WEST PALM BEACH FL 33401					100 N.W. 12TH AVENUE					
					City DEERFIE	Η,	FL	Zip Code 33442		
SIGNATURE  9. Capital Co as Shown	Signatu byed ontributions on record.	Sorna CCC or printed name of registered agent a \$9,000,000.00	10. Amount of Capit in FLORIDA to o	LANT( E: Registere tal Contri date.	ON od Agent signature required buttions	when reinstating)	11. MAKE CHEC	3/2/ DATE IK PAYABLE SE SIDE FOR	O TO DEPT. OF STATE FEE INFORMATION	
			HAT IS A BUSINESS EN Y NOT be changed on t							
12.	NOIE	GENERAL PARTNER	<del></del>	13.	i, an amenumen	it must be med	ADDRESS CHA			
DOCUMENT # NAME STREET ADDRESS	J.M. FAMILY REAL ESTATE CORP.				EET ADDRESS					
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indicated	l on this repo ver or trustee	rt is true and accurate and	this filing does not qualify for that my signature shall have s report as required by Chap	the same oter 620,	e legal effect as if n Florida Statutes	ection 119.07(3)(i) nade under oath; i C, JM FAMI EAL CITATE	hat I am a Genera	I Partner of t	fy that the information he limited partnership or 54-429-25-66	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER