2001 UNIFORM BUSINESS REPORT (UBR)

FILED

01 MAY 23 PM 4:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[redacted]

DOCUMENT # A97000000773

1. Entity Name

JMM INVESTMENTS, LTD.

Principal Place of Business	Mailing Address
~~50 N. Laura St. Ste 3500~~ ~~Jacksonville, FL 32202~~ 67 Long Point Drive Amelia Island, FL 32034	~~50 N. Laura St.~~ ~~Suite 3500~~ ~~Jacksonville, FL~~ ~~32202~~
2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE MJM

4. FEI Number (S) 59-3496995 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

Taylor, John C. Jr., Esq.
~~50 North Laura St., Ste 3500~~
~~Jacksonville, FL 32202~~
67 Long Point Drive
Amelia Island, FL 32034

7. Name and Address of New Registered Agent

Name

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

City FL Zip Code

~~500004421165--9~~
-06/14/01--01123--017
~~****525.00~~ ****526.25

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. Capital Contributions as Shown on record. $2,815,000.00

10. Amount of Capital Contributions in FLORIDA to date. [redacted]

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 # / NAME / STREET ADDRESS / CITY-ST-ZIP	~~P97000030635~~ JMM INVESTMENTS G.P., INC. ~~50 N. Laura St., Ste 3500~~ Jacksonville, FL 32202	STREET ADDRESS / CITY-ST-ZIP	
DOCUMENT # / NAME / STREET ADDRESS / CITY-ST-ZIP	67 Long Point Road Amelia Island, FL 32034	STREET ADDRESS / CITY-ST-ZIP	
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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: John C. Taylor 4/28/01 904-858-2681
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #

ORDER# 111900