2000 UNIFORM BUSINESS REPORT (UBR)

1. Entity Name ST. JOE/CNL LEGACY POINT I, LTD.									28, 200 cretary			1 V1
				ailing Address								
ORLANDO 32801	ORLANDO FL ORI			ANDO	FL							
				Mailing Address s. orange avenue								
				Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & Sta ORLANDO				City & State ORLANDO		FL	4. FEI Number 59-3547097					Applied For Not Applicable
Zip 32801		Country	3280		Coun	try		5. Certificate of Status Desired S8.75 Addition Fee Required			Additional	
	6. Name a	nd Address of Curre	ent Regist	ered Agent				7. Name and	Address of Nev	v Registered	Agent	·
WHITEJOHNSON KYLE L						Name						
400 EAST SOUTH STREET						BOURNE ROBERT A Street Address (P.O. Box Number is Not Acceptable)						
						450 S. O	RANGE A	VENUE	er is Not Accepta			
32801	ORLANDO FL 32801 US										•	
						City ORLAN	NDO FL Zip Code 32801					
8. The above	named entity s	submits this statemen	t for the p	urpose of changing its	registere			agent, or both	h, in the State of	Florida.	328	01
SIGNATURE		T A. BOURN		applicable (NOT	F Banctora	1 Agent signal	uro roqueod um	nen reinslating)		03/28	/2 000)
9. Capital Contributions as Shown on record. 13,000,000.00 in FLORIDA to date						outions		ion residings	11: MAKE CH SEE REV	IECK PAYABLE	TO DEP	T. OF STATE
	A GE NOTE: (NERAL PARTNE General Partners	R THAT I	S A BUSINESS EN	TITY M	UST BE	REGISTE	RED AND A	CTIVE WITH T	HIS OFFICE		oranominos
12.	13.	,				HANGES ON						
DOCUMENT #	ST. JOE/ CNL REALTY GROUP, LTD.					ET ADDRESS	450 S. O	RANGE AVEN				
STREET ADDRESS	400 EAST SOUTH STREET				-ST-ZIP	ORLANI	DO		FL	32801		
DOCUMENT#	ORLANDO			FL 32801			. Oldzi i					
NAME STREET ADDRESS					STRE	ET ADORESS						
CITY-ST-ZIP						CITY-ST-ZIP						
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DOCUMENT # VAME					STREE	T ADDRESS						
STREET ADDRESS CITY-ST-ZIP					CITY-	ST-ZIP						
14. Thereby o	certify that the in	formation supplied w	ith this file	nd does not qualify for	the aver	antion state	ad in Conti	110.07(0)(0)	Charlet Design			:

DODEDT A DOLLDME

Thereby 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