

B95000000057



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 JUN 17 PM 1:40

LIMITED PARTNERSHIP

DOCUMENT # B95000000057

1. Name of Limited Partnership

JLM Investment Associates Limited Partnership

DO NOT WRITE IN THIS SPACE

2. Mailing Address 3238 Casseekey Island Rd. Suite, Apt #, etc. City & State Jupiter, Fla. Zip 33477 Country Palm beach		3. Principal Office Address 3238 Casseekey Island Rd. Suite, Apt #, etc. City & State Jupiter, Fla. Zip 33477 Country Palm beach		4. Date Formed or Registered To Do Business in Florida 02/17/95	
5. FEI Number 65-0560538		6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status		7. State or Country of Formation Washington	
8a. Capital Contributions as Shown Recorded \$901,683.00		8b. Amount of Capital Contributions in FLORIDA to date \$901,683.00		FEES: 1.) Filing Fee(s): Computed at a rate of \$7 per \$1,000 on amount entered in 8b, with a minimum filing fee of \$52.50 and a maximum of \$437.50, for each year due this office. 2.) Supplemental Fee(s): \$88.75 for each year due this office, beginning with 1992 calendar year. 3.) Penalty Fee(s): \$500 penalty fee for each year report form is delinquent. Note: If the amount entered in 8b is greater than amount entered in 8a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.	

9. Name and Address of Current Registered Agent Louis L. Hamby III 321 Royal Poinciana Plaza Palm Beach, Florida 33480		10. If changed, new registered agent/office Name M. Leon Moore Street Address (P.O. Box Number Is Not Acceptable) 3238 Casseekey Island Road Suite, Apt #, etc. City Jupiter FL Zip Code 33477	
---	--	--	--

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organ zed or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) M. Leon Moore DATE 6-16-98

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Names of General Partner(s) Q H A, Inc. (a Washington Corp.)	Address of Each General Partner (Do NOT Use Post Office Box Numbers) 3238 Casseekey Island Road	City, State and Zip Code Jupiter, Fla. 33477	11a. Registration Document Number F 95 000000B11 MHA
--	---	---	--

REINSTATEMENT 1997, 1998
200002565922--6
-06/19/98--01095--001
***2061.25 ***2061.25

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE QHA, Inc. by Jon E. Marshall DATE 6-16-98
Typed or Printed Name of General Partner Signing Form QHA, Inc. by Jon E. Marshall Telephone Number (561) 747-8980

CR2E039 (12/97)