

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L00000007822

FILED
Feb 06, 2002 8:00 AM
Secretary of State

Entity Name: MEADOW CREEK PARTNERS, L.L.C.

Current Principal Place of Business:

% MCGUIRE, WOODS/ ATTN: LISA ORMOND TAYLOR
50 NORTH LAURA ST, SUITE 3300
JACKSONVILLE, FL 32202

New Principal Place of Business:

1650 PRUDENTIAL DRIVE
SUITE 400
JACKSONVILLE, FL 32207

Current Mailing Address:

% MCGUIRE, WOODS/ ATTN: LISA ORMOND TAYLOR
50 NORTH LAURA ST, SUITE 3300
JACKSONVILLE, FL 32202

New Mailing Address:

1650 PRUDENTIAL DRIVE
SUITE 400 - ATTN. LEGAL DEPT
JACKSONVILLE, FL 32207

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

PAINE, LAWRENCE
1650 PRUDENTIAL DRIVE
SUITE 400 - ATTN. LEGAL DEPT.
JACKSONVILLE, FL 32207 US

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: LAWRENCE PAINE

02/06/2002

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: TAYLOR, LISA O
Address: 50 NORTH LAURA STREET SUITE 300
City-St-Zip: JACKSONVILLE, FL 32202 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SHINN, ROBERT L
Address: 4901 VINELAND ROAD
City-St-Zip: ORLANDO, FL 32811 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ROBERT L. SHINN

MGR

02/06/2002

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date