

2001 UNIFORM BUSINESS REPORT (UBR)

0020954 AF

DOCUMENT # L00000008146

1. Entity Name

JA REALTY HOLDINGS, LLC

FILED

01 MAY -1 PM 5:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

2154 TRADE CENTER WAY, SUITE 3
NAPLES FL 34109

Mailing Address

2154 TRADE CENTER WAY, SUITE 3
NAPLES FL 34109



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business C/O

Landmark Development Group

3. Mailing Address C/O

Landmark Development Group

Suite, Apt. #, etc.

5668 Strand Court, #108

Suite, Apt. #, etc.

5668 Strand Court, #108

City & State

Naples, FL

City & State

Naples, FL

4. FEI Number

59-3657203

Applied For

Not Applicable

Zip

34110

Country

US

Zip

34110

Country

US

5. Certificate of Status Desired

☐

\$5.00 Additional

Fee Required

6. Name and Address of Current Registered Agent

CLASP, INC.

3001 TAMiami TRAIL NORTH, 4TH FLOOR

NAPLES FL 34103

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

800004274918-6
-05/21/01--01187--008
*****50.00 *****50.00

9. MANAGING MEMBERS/MEMBERS

TITLE MGR
NAME SHAFRAN, ARTHUR A
STREET ADDRESS 2154 TRADE CENTER WAY, SUITE 3
CITY-ST-ZIP NAPLES FL 34109 ☐ Delete

TITLE MGR
NAME PIERCE, JAMES E
STREET ADDRESS 2154 TRADE CENTER WAY, SUITE 3
CITY-ST-ZIP NAPLES FL 34109 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

10. ADDITIONS/CHANGES

TITLE MGR
NAME Shafran, Arthur A.
STREET ADDRESS 5668 Strand Court, #108
CITY-ST-ZIP Naples, FL 34110 ☒ Change ☐ Addition

TITLE MGR
NAME Pierce, James E.
STREET ADDRESS 5668 Strand Court, #108
CITY-ST-ZIP Naples, FL 34110 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

11. 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 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:

SIGNATURE REQUIRED

Arthur A. Shafran, Manager

941-597-8400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (11/00)