## LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

## FILED May 27, 2003 8:00 am Secretary of State

	MIFORM BOSINE	33 NEPUNI	(OBN)				
DOCU 1. Entity Nan	MENT # L01000008			05-27-2003 90056 047 ****50.00			
JANA REALTY INVESTMENTS, LLC							
							•
	DO NOT WRITE	IN THIS SI	PACE	1 01 W 4	10105954	A. T.	* :
2 Principal F	Place of Business	3. Mailing Address			3		
Principal Place of Business     540 S. Ocean Blvd.		777 South Flagle	r Drive		,-, ,	· .	
Suite, Apt.	#, etc.	Suite, Apt. #, etc. Suite 500 East	-		DO NOT WRITE II	N THIS SPACE	
City & State Palm Beach, Florida		City & State West Palm Beach, Florida		4. FEI No	omber 65-1109488	Applied For Not Applicab	ıle
Zip 33480	Country USA	Zip 33401	Country USA		cate of Status Desired	\$5.00 Additional Fee Required	7
			Nama		nd Address of Current Re	gistered Agent	コ
	DO NOT W	RITE	i <sup>6</sup> 1	Name Anna Clark			
IN THIS SPACE  Street Address (P.O. Box Number is Not Acceptable)							_
IN THIS SPACE			**	6. Ocean Blvd.			
	1 - 0		City P	alm Beach		FL Zip Code 33480	
8. The above the obligat	named entity submits this statement for tions of registered agent.	the purpose of changing its	registered office o	r registered agent, o	r both, in the State of Florida	aul am familiar with, and accept	1
	* A Lie		Anna Cla	ırk		102	
SIGNATURE .	Signature, typed or prioted naive of registered agent at		. ,	K		DATE	_
	•	Make Check Payab	FEE IS \$50.00 le to Florida De	partment of State		•	
* *-	. • _ •		UE BY MAY 1				
9.44	MANAGING MEMBER	RS/MANAGERS	TITLE	<u> </u>		<u> </u>	$\exists^{\alpha}$
NAME	Managing Member Anna Clark		NAME			1 *	(12/0
STREET ADDRESS CITY-ST-ZIP	540 S. Ocean Blvd.		STREET ADDRESS CITY-ST-ZIP				CR2E083B (12/02
TITLE	Palm Beach Fl 33480 Member		TITLE	-	) jest jest	,	- 12E
NAME STREET ADDRESS	Jane Buffett				7. 1. 4. 1. 3.	, S	ि
CITY-ST-ZIP	1880 Century Park E., Suite	• 1600 	STREET ADDRESS CITY-ST-ZIP	wassen) Park was a	<u></u>		
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TITLE NAME			TITLE SET				3
STREET ADDRESS	,		STREET ADDRESS				
11. hereby o	certify that the information supplied with t	his filing does not qualify for	CITY-ST-ZIP	ted in Section 119.07	(3)(i) Florida Statutos 1 fun	her certify that the information	4
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 the 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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.							
SIGNATURE: Anna Clark (561) 833-1334  SIGNATURE AND TYPED OR PRIMED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Proce #							
					- 410	Dayono i non a w	1