

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000029447

FILED  
Feb 13, 2009  
Secretary of State

Entity Name: JAX REALTY PARTNERS, LLC

**Current Principal Place of Business:**

12060 HWY 219  
WEST POINT, GA 31833

**New Principal Place of Business:**

**Current Mailing Address:**

12060 HWY 219  
WEST POINT, GA 31833

**New Mailing Address:**

FEI Number: 59-3121634

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MARON, LAWRENCE  
509 WILLOW RUN KNOLL  
LAKELAND, FL 33813 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: HAMMOND, CLINTON  
Address: 12060 HIGHWAY 219  
City-St-Zip: WEST POINT, GA 31833

Title: MGRM ( ) Delete  
Name: MARON, LAWRENCE  
Address: 509 WILLOW RUN KNOLL  
City-St-Zip: LAKELAND, GA 33813

Title: MGRM ( ) Delete  
Name: VAN REENEN, WILLEM J  
Address: 6608 HEATHERTON COURT  
City-St-Zip: TEMPLE TERRACE, FL 33617

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CLINTON D. HAMMOND

MGR

02/13/2009

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