

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000029447

**FILED**  
**Mar 11, 2010**  
**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:**

11175 CICERO DRIVE  
ALPHARETTA, GA 30022

**Current Mailing Address:**

12060 HWY 219  
WEST POINT, GA 31833

**New Mailing Address:**

11175 CICERO DRIVE  
ALPHARETTA, GA 30022

**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  
Name: HAMMOND, CLINTON  
Address: 12060 HIGHWAY 219  
City-St-Zip: WEST POINT, GA 31833

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

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

I hereby 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 HAMMOND

MGMR

03/11/2010

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