2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000001327

Entity Name: PASEOS, LLC

FILED Apr 16, 2008 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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245 RIVERSIDE AVENUE, SUITE 500 JACKSONVILLE, FL 32202 US

Current Mailing Address: New Mailing Address:

245 RIVERSIDE AVENUE, SUITE 500
ATTN: LEGAL DEPT - SUSAN WHITLATCH
JACKSONVILLE, FL 32202 US

245 RIVERSIDE AVENUE, SUITE 500
ATTN: LEGAL DEPT
JACKSONVILLE, FL 32202 US

FEI Number: 65-1102983 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MARX, CHRISTINE M 245 RIVERSIDE AVENUE, SUITE 500 JACKSONVILLE, FL 32202 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 THE ST JOE COMPANY,
 Name:

 Address:
 245 RIVERSIDE AVENUE, SUITE 500
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32202
 City-St-Zip:

Title: EC-P (X) Delete Title: () Change () Addition

 Name:
 CASSALA, NICK
 Name:

 Address:
 12724 GRAN BAY PKWY SUITE 150
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32258
 City-St-Zip:

Title: EC-V (X) Delete Title: () Change () Addition

 Name:
 LASSMAN, MARK D
 Name:

 Address:
 7900 GLADES ROAD SUITE 200
 Address:

 City-St-Zip:
 BOCA RATON, FL 33434
 City-St-Zip:

Title: EC-V (X) Delete Title: () Change () Addition

 Name:
 WRENN, LISA
 Name:

 Address:
 1137 MARBELLA PLAZA DRIVE
 Address:

 City-St-Zip:
 TAMPA, FL 33619
 City-St-Zip:

Title: EC-V (X) Delete Title: () Change () Addition

 Name:
 WHYTE, DON
 Name:

 Address:
 1137 MARBELLA PLAZA DRIVE
 Address:

 City-St-Zip:
 TAMPA, FL 33619
 City-St-Zip:

Title: S (X) Delete Title: () Change () Addition

 Name:
 MARX, CHRISTINE M
 Name:

 Address:
 245 RIVERSIDE AVENUE, SUITE 500
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32202
 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: CHRISTINE M. MARX SEC 04/16/2008