

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# M01000001327

FILED  
Apr 24, 2003  
Secretary of State

Entity Name: PASEOS, LLC

## Current Principal Place of Business:

7900 GLADES RD  
SUITE 200  
BOCA RATON, FL 33434 US

## New Principal Place of Business:

245 RIVERSIDE AVENUE, SUITE 500  
JACKSONVILLE, FL 32202 US

## Current Mailing Address:

1650 PRUDENTIAL DRIVE  
SUITE 400 - ATTN: LEGAL DEPARTMENT  
JACKSONVILLE, FL 32207 US

## New Mailing Address:

245 RIVERSIDE AVENUE, SUITE 500  
ATTN: LEGAL DEPARTMENT  
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:

PAINE, LAWRENCE  
1650 PRUDENTIAL DRIVE SUITE 400  
JACKSONVILLE, FL 32207 US

## Name and Address of New Registered Agent:

PAINE, LAWRENCE  
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:

04/24/2003

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete  
Name: THE ST JOE COMPANY,  
Address: 7900 GLADES RD SUITE 200  
City-St-Zip: BOCA RATON, FL 33434

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: THE ST JOE COMPANY,  
Address: 245 RIVERSIDE AVENUE, SUITE 500  
City-St-Zip: JACKSONVILLE, FL 32202

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LAWRENCE PAINE

AS

04/24/2003

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