File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS 98 FEB 26 PM 4: 10 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Malling Address of Limited Liability Company **DOCUMENT # M96000000020** 1a. Principal Place of Bu J.D. INVESTMENT PROPERTIES, L.L.C. 132 WEST 2ND STREET 132 WEST 2ND STREET TIFTON GA 31794 TIFTON GA 31794 3. Date Organized or Qualified 2. Principal Place of Business 2a. Mailing Address 3a. State of Formation 01/16/1996 GA Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 59-3367451 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country Country Zip Zip SB 75 Additional Fee Required 04/11/1997 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office DONALD, JACK LEE 12 N.W. 5TH PLACE Street Address (P.O. Box Number is Not Acceptable) WILLISTON FL 32396 Suite, Apt. #, etc. City Zip Code 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations. SIGNATURE_ DATE (Registered Agent Accepting Appointment) (NOTE Registered Agent signature required when reinstating) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGRM DONALD, JACK LEE 12 N.W. 5TH PLACE WILLISTON FL 40D002448634-- 8 -03/05/93--01113--007 ****188.75 ****188.75

1 do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. If urther certify that the information indicated on this annual report is true and accurate and that 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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address