

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M99000001084

1. Entity Name

East Hampton GP, LLC

FILED

00 APR 28 PM 1:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
7751 Belfort Parkway
Suite 350
Jacksonville, FL 32256

Mailing Address
7751 Belfort Parkway
Suite 350
Jacksonville, FL 32256

2. Principal Place of Business
10161 Centurion Parkway N.

Suite, Apt. #, etc.
Suite 190

3. Mailing Address
10161 Centurion Parkway N.

Suite, Apt. #, etc.
Suite 190

City & State
Jacksonville, FL

City & State
Jacksonville, FL

4. FEI Number
56-2153543

Applied For
Not Applicable

Zip
32256

Country
USA

Zip
32256

Country
USA

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Burr, Edward E.
7751 Belfort Parkway, Suite 350
Jacksonville, FL 32256

7. Name and Address of New Registered Agent

Name
Burr, Edward E.

Street Address (P.O. Box Number is Not Acceptable)
10161 Centurion Parkway N.

Suite 190

City
Jacksonville

FL

Zip Code
32256

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/26/00

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS / MEMBERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
LandMar Group, LLC
10161 Centurion Pkway N. Ste 190
Jacksonville, FL 32256

☐ Delete

☐ Delete

☐ Delete

☐ Delete

☐ Delete

☐ Delete

10. ADDITIONS / CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify 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 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.

East Hampton GP, LLC By: LandMar Group, LLC By: LandMar Management, Inc.

SIGNATURE: By: [Signature] Title: President

4/26/00

904-998-8300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #



ACCOUNT NO. : 072100000032

REFERENCE : 679362 4732152

AUTHORIZATION : *Patricia Pujut*

COST LIMIT : \$ 50.00

ORDER DATE : April 28, 2000

ORDER TIME : 11:34 AM

ORDER NO. : 679362-015

CUSTOMER NO: 4732152

CUSTOMER: Ms. Beth E. Mangus
Gartner Brock & Simon
Suite 203
1660 Prudential Drive
Jacksonville, FL 32207

ANNUAL REPORT FILING

NAME: EAST HAMPTON GP, LLC

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds

EXAMINER'S INITIALS: _____

RECEIVED
00 APR 28 PM 12:20
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA